

# The Lebanese American Association

*serving the community since 1989*



## SCHOLARSHIP APPLICATION

For the Year \_\_\_\_\_

**Application must be received by May 1<sup>st</sup> of the current year**

**And mailed to: LAA, P.O. Box 4464, Burlingame, CA 94010**

To complete this Form you must provide the information/documentation requested in the document titled: LAA Scholarship Requirements from Prospective Applicants. Failure to provide the requested documents will, most likely, result in disqualifying the application.

Full Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
\_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Telephone: \_\_\_\_\_ Best time to reach you: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Your Nationality: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Name of the school you presently attending: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

How long have you attended this school? \_\_\_\_\_ tuition per semester/term \_\_\_\_\_

This scholarship will be used to attend which school?

Name of school: \_\_\_\_\_

Address if different from above: \_\_\_\_\_  
\_\_\_\_\_

What is your cumulative GPA? \_\_\_\_\_ Date you anticipate graduating? \_\_\_\_\_

What is your major of study? \_\_\_\_\_

How long have you lived in the Bay Area, California, U.S.A.? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Lebanese American Association - P.O. Box 4464 - Burlingame, California 94010**

**Email: [laa@Laa.org](mailto:laa@Laa.org) - Website: [www.Laa.org](http://www.Laa.org) -**