LORAMIE LIBERTY DAYS SCHOLARSHIP APPLICATION

Please return to the High School Guidance Counselor
by Friday, March 5th 2027

NAME _____ PHONE # _____

ADDRESS_____

EMAIL _____

Application should include:

- PAGE 1: FILL OUT- Name, phone address and email
- PAGE 2: FILL OUT- activities page
- PAGE 3: (PAGE NOT INCLUDED) Write an essay stating what your goals are after graduation, why you deserve the scholarship, and anything additional you would like to add.

Additional information:

- The scholarship committee blindly selects the scholarship winner; therefore, the first page is omitted to the committee. Please do not reference first or last names within the second and third pages of the application.

ACTIVITIES: (Please shade in appropriate box)

	9	10	11	12
Cross Country				
Football				
Volleyball				
Basketball				
Cheerleading				
Track				
Baseball				
Golf				
Swimming				
Softball				
National Honor Society				
Yearbook				
FFA				
FCCLA				
Student Council				
Class Officer				
History Club				
Marching Band				
Chorus				
Art Club				
Academia Team				
Drama				
Mathletes Peer Tutoring				
Pep Band				
Science Olympiad				
Spanish Club				
Honor Roll				

Community Service:	<20	<50	50+

Applicant Involvement in Liberty Days

	<2yrs	<4yrs	<6yrs	6+yrs

Parent Involvement in liberty Days

	<3yrs	<6yrs	<9yrs	10+yrs

Other:				

Current GPA: _____

College/University: _____

Major: _____