

Cleveland, Ohio

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January 19, 2012

Dear College Counselor,

The Lebanese Syrian American Junior League, formerly the Lebanese-Syrian Junior Women's League, is awarding two (2) \$1,000.00 college scholarships to an academically outstanding young man and woman of *Lebanese* or *Syrian* descent residing in the Greater Cleveland area. The student must be graduating in either the January or June class of this current school year with a "B" or better scholastic average.

If you have a student(s) eligible for this scholarship, we would appreciate your cooperation in sending us an official copy of the student's high school transcript, along with the student's ACT or SAT scores and your recommendation, in a sealed envelope along with the application completed by the student.

Enclosed you will find one (1) double-sided application. Please make copies if necessary. To insure that the judges have sufficient time to review all of the applications, all completed forms must be postmarked by **March 31, 2012. No applications will be accepted after deadline.**

The scholarships will be awarded at our Debutante Ball and Scholarship Presentation on July 29, 2012. **The recipient or a member of the recipient's immediate family must be present at the Debutante Ball and Scholarship Presentation for acceptance; otherwise, the scholarship will be awarded to the next qualified candidate.**

If you have any further questions or comments, please do not hesitate to contact me. Your assistance in this matter greatly appreciated.

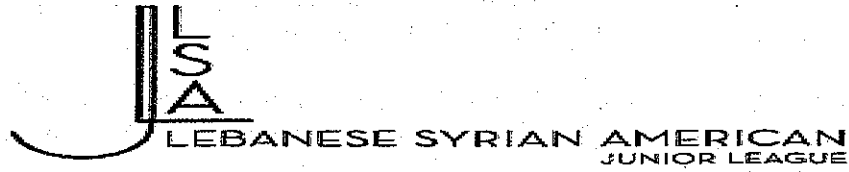
Sincerely,

Mrs. Amber (Joseph) Wiesner
Second Vice President, Scholarship Chairwoman
11905 Harbour Light Drive
North Royalton, Ohio 44133
216.392.4198

Enclosure

E-Mail: LSAJLscholarship@gmail.com

Revised 1/12



(formally the Lebanese-Syrian Junior Women's League)
(A Non-Profit Organization)

Application for College Scholarship

Applicant must be of Lebanese or Syrian descent and reside in the Greater Cleveland area

Name: _____

Address: _____ City/State/Zip: _____

Phone No.: _____ Parent Phone No.: _____

E-Mail: _____ Parent E-Mail: _____

Father's Name & Full Nationality: _____

Mother's First & Maiden Name & Full Nationality: _____

Paternal Grandparents Name & Full Nationality: _____

Maternal Grandparents Name & Full Nationality: _____

Are you related to a member of this League? Yes/No If so, who and how? _____

Name & Full Address of High School: _____

High School Phone No.: _____

Principal's Name: _____

Guidance Counselor's Name: _____

Number in graduating class and your rank: _____ Member of NHS? Yes/No

College you expect to attend: _____

Proposed Major Field of Study: _____

Projected Date of Admission to College: _____

Have you been employed during the school year or summer? Yes/No

If so, where? _____

Honors or Awards you have received: _____

Scholarships received from other sources: _____

Community and Church organizations you participate in or volunteer for: _____

Extracurricular activities you have participated in and offices held: _____

Signature

Date

(PLEASE TURN APPLICATION OVER)

In 200 words, write a brief autobiography, including your senior year of high school and your plans for the future. Please attach your autobiography to this application.

Applications must be returned to the Scholarship Chairwoman whose address is listed below and must be postmarked by March 31, 2012. No applications will be accepted after this date. Please be sure it is complete and includes the following:

- This application form (2 Pages)
- The 200 word autobiography
- An official (**sealed**) copy of your high school transcript
- An official (**sealed**) copy of your SAT and/or ACT exam scores
- Two letters of recommendations (at least one from a teacher)
- Current photo

The scholarships will be awarded at the Debutante Ball and Scholarship Presentation on July 29, 2012. More information on this event will follow. **It is imperative that the recipient or a member of the recipient's immediate family is present at the presentation for acceptance; otherwise, the scholarship will be awarded to the next qualified candidate.**

The information requested in this application will be considered strictly confidential. Please send all applications to:

Mrs. Amber (Joseph) Wiesner
Second Vice President, Scholarship Chairwoman
11905 Harbour Light Drive
North Royalton, Ohio 44133
(216) 392-4198
E-Mail: LSAJLScholarship@gmail.com

HOLD HARMLESS CLAUSE

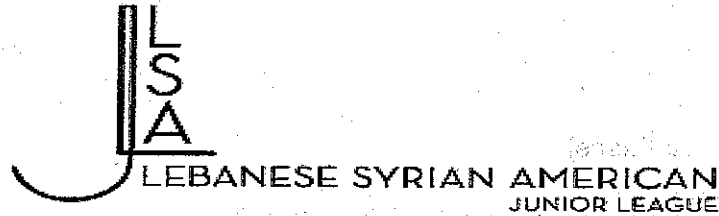
Please Read, Sign & Date:

The LSAJL Scholarship participation guidelines are enclosed with this application form. By signing, the undersigned acknowledges receipt of the guidelines and agrees to abide by such. The undersigned also agrees to waive all personal claims, causes of action, or damages against the Lebanese Syrian American Junior League, its Board members, officers or associates thereof, arising from or growing out of their participation in the LSAJL Scholarship program. In addition, the undersigned agrees to allow his/her name to be used for publicity purposes should he/she be awarded a scholarship.

My signature confirms that I have read, understand and agree to the terms and conditions of this application and that all information provided on this application is correct. I also understand that said information is regarded as confidential and for the exclusive use of the LSAJL Scholarship Committee for the purpose of determining scholarship awards.

Student Signature: _____
Date: _____

Parent/Guardian Signatures: _____
Date: _____



Cleveland, Ohio
Founded 1929

Release of School Information

I give my permission to: _____
Name of School

For the release of my complete transcript of grades and test scores, including the SAT and/or the ACT, to the Lebanese Syrian American Junior League for their use in considering my application for Scholarship.

STUDENT: _____

WITNESS: _____

DATE: _____

Information to be official, sealed copy.