

Community activities (describe the activity, include number of years and offices held):

Describe your goal(s) and your strategy to achieve goal(s):

I have completed the above Application Form and the information that I have provided is true, correct, and complete to the best of my knowledge. I understand that providing false information will result in recall of the scholarship and that I will be financially responsible to return all money to the Lovettsville-Waterford Ruritans.

Applicant Signature

Date

FINANCIAL STATEMENT

I. Student Employment (includes full or part-time during the last two years)

<u>EMPLOYER</u>	<u>TYPE OF WORK</u>	<u>EMPLOYED</u> <u>FROM</u> <u>TO</u>	<u>WEEKLY</u>

Amount you have saved toward future _____

I/we declare the information in this application and financial statement to be true and accurate, to the best of my/our knowledge.

Signature of Student

Signature of Parent(s) or Guardian(s)

I authorize the release of transcript to the Scholarship Committee so that he/she may be considered for this scholarship.

Signature of student

Signature of parent if student is under 18

Date

Date