

**Lakeshore Middle School
900 S. Cutler
Grand Haven, MI 49417**

**“That’s How We Roll”
Scholarship Application Criteria**

Lakeshore Middle School is offering a \$500.00 non-renewable scholarship to a graduating Grand Haven High School senior who is a former Lakeshore Middle School student.

The following criteria will be considered in making scholarship decisions.

1. Eligible applicants from the 2024-2025 graduating class must have attended Lakeshore Middle School for a minimum of 1 year.
2. The applicant intends to continue his/her education.
3. A full transcript is requested.
4. An essay describing yourself, including your act of kindness. How has your act benefited or changed a life or lives? How has your life been impacted? Typically, kind people are not seeking a reward for their actions. By taking this opportunity to share something you’ve accomplished you will potentially inspire others to follow your example.
5. Using a separate attachment, please list civic, school, non-school, extra curricular, and work activities. You may include honors, awards, or offices held. (Be sure to include dates, and/or time references).
6. Two or more letter(s) of recommendation, preferably from a teacher, mentor, advisor (an adult) associated with the act(s) of kindness referred to in your essay.
7. A completed application form.

The guidelines for the essay are vague. The intention is to make the scholarship available to many people and encompass a wide variety of circumstances and/or situations.

Applications should be received by February 20, 2025. Please submit the application, essay, transcript and letter(s) of recommendation to:

Lakeshore Middle School
900 S. Cutler
Grand Haven, MI 49417

LAKESHORE MIDDLE SCHOOL
"That's How We Roll"
SCHOLARSHIP APPLICATION
FORM 2024-2025

Name _____

(last) (first) (middle)

Address _____
(street) (city) (state) (zip)

Phone _____ Date of Birth _____

Parent (Guardian) Name _____

Dates you attended Lakeshore Middle School _____

College, University, or School you will be attending next year_____

Your status at the school you plan to attend is: (circle one)

Accepted Pending Enrolled

Cumulative G.P.A. _____

In the event additional information is needed, we might like to contact the individual(s) who provided the letter(s) of recommendation. Please provide name(s), address, and telephone number(s) below. If additional space is required, please use the back of this form.

Name _____

Address _____ Address _____

Phone _____ Phone _____

Using a separate attachment, please list civic, school, non-school, extra curricular, and work activities. You may include honors, awards, or offices held. (Be sure to include dates, and/or time references).

Using another separate attachment, please describe yourself, including your "act of kindness". How has your act benefited or changed lives? What was the positive impact? Was the outcome what you had hoped for, and what were the results?

In addition, please include two letters of recommendation. One letter should be from a teacher, and the other from an adult you have worked with relating to "an act of kindness".

Please attach a high school transcript.

Applicant's Signature

Date

Parent/Guardian Signature

Date