



# Scholarship Application

Submit by Email

Print Form

To apply for a scholarship, please fill out the application below and attach a copy of proof of income (a pay stub, recent tax form, or reduced lunch form) and email to [acollins@lasclex.org](mailto:acollins@lasclex.org), mail, fax or drop them off at the LASC. Please submit your application as early as possible prior to the start of the class. You will be contacted regarding the LASC's ability to provide the requested scholarship.

362 N. Martin Luther King Blvd., Lexington, KY 40508, 859-252-5222 or 255-2284, [WWW.LASCLEX.org](http://WWW.LASCLEX.org)

**Scholarship Application Due: No later than two weeks before start of class**

Parent/Guardian Name: \_\_\_\_\_  
 Student Name: \_\_\_\_\_  
 Birthdate of Student: \_\_\_\_\_ Male/Female/Other: \_\_\_\_\_  
 School: \_\_\_\_\_ Last Grade Completed: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Number of people in household: \_\_\_\_\_ Annual Income: \_\_\_\_\_  
 I have submitted information regarding proof of income: Yes \_\_\_\_\_ No \_\_\_\_\_

This is a scholarship request for a:

- \_\_\_\_\_ 50% Scholarship (student pays 50% of the cost of the class)
- \_\_\_\_\_ 75% Scholarship (student pays 25% of the cost of the class)
- \_\_\_\_\_ 100% Full Scholarship (student does not pay for the class)

Materials and supplies for all classes will be provided by the Living Arts & Science Center.

Below are the LASC Classes that I am interested in attending.

(If you do not have an LASC class schedule, please call for one or you see the completed schedule at [www.LASCLEX.org](http://www.LASCLEX.org))

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I understand that if I receive a partial or full scholarship, I will be able to participate in the class (or classes) of my choice at the Living Arts & Science Center. I am making a commitment to arrive on time for all of the sessions and to participate fully in the class.

\_\_\_\_\_ Date \_\_\_\_\_  
**Student Signature**

As the parent or guardian, I will provide transportation or make arrangements for this student to attend class.

\_\_\_\_\_ Date \_\_\_\_\_  
**Parent Signature**

Scholarships will be awarded based on financial need and availability in the class. The Living Arts & Science Center will try to meet as many scholarship requests as possible. If we are unable to award a scholarship for the above classes, the LASC will keep your application on file and notify you when there is another available class.