



**IDENTIFICATION**

<b>1. APPLICANT INFORMATION</b>				
LAST NAME		FIRST NAME		MIDDLE NAME
2. HOME ADDRESS		STREET	CITY	STATE ZIP CODE
3. HOME TELEPHONE NUMBER (INCLUDE AREA CODE)		5. EMAIL ADDRESS		6. DATE OF BIRTH
4. CELL PHONE NUMBER (INCLUDE AREA CODE)				
7. ARE YOU A RESIDENT OF WARD 7? (You must be a Ward 7 resident to be considered for scholarship) <input type="checkbox"/> YES <input type="checkbox"/> NO		8. HOW DID YOU LEARN OF THE LLOYD D. SMITH FOUNDATION SCHOLARSHIP?		

**HOUSEHOLD INFORMATION**

<b>9A. PARENT/GUARDIAN INFORMATION (Mother)</b>			<b>9B. PARENT/GUARDIAN INFORMATION (Father)</b>		
LAST NAME		FIRST NAME	LAST NAME		FIRST NAME
HOME ADDRESS (If different from student applicant) STREET			HOME ADDRESS (If different from student applicant) STREET		
STATE		CITY	STATE		CITY
OCCUPATION			OCCUPATION		
CURRENT HOUSEHOLD INCOME		CURRENT HOUSEHOLD DEPENDENTS		CURRENT HOUSEHOLD INCOME	
				CURRENT HOUSEHOLD DEPENDENTS	
10. INDICATE ON SEPARATE SHEET OF PAPER WHY FINANCIAL ASSISTANCE IS BEING REQUESTED (MUST BE SIGNED BY PARENT/GUARDIAN)					

**EDUCATION**

<b>11. HIGH SCHOOL INFORMATION</b>				
NAME OF SCHOOL		ADDRESS		SCHOOL TELEPHONE NUMBER
12. SAT OR ACT SCORE	13. CUMULATIVE GPA	14. GRADUATION DATE	15. HIGH SCHOOL COUNSELOR NAME	
16. COLLEGE/UNIVERSITY/OTHER HIGHER LEARNING INSTITUTION(S) YOU HAVE APPLIED:				
NAME OF SCHOOL	ADDRESS	FIELD OF STUDY	HAVE YOU BEEN ACCEPTED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SCHOOL	ADDRESS	FIELD OF STUDY	HAVE YOU BEEN ACCEPTED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
WILL YOU BE ENROLLING AS A FULL-TIME STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO				

**HONORS AND ACTIVITIES**

17. HONORS AND AWARDS: LIST ON A SEPARATE SHEET OF PAPER (TYPED) ANY SCHOLASTIC HONORS AND AWARDS YOU HAVE RECEIVED WHILE IN HIGH SCHOOL (copy of awards may be included).
18. ACTIVITIES: LIST ON A SEPARATE SHEET OF PAPER (TYPED), IN ORDER OF IMPORTANCE TO YOU, ANY EXTRA-CURRICULAR ACTIVITIES IN WHICH YOU HAVE ACTIVELY PARTICIPATED, INCLUDING SCHOLASTIC, CULTURAL, RELIGIOUS, ATHLETIC, CIVIC OR COMMUNITY ACTIVITIES, AND LEADERSHIP POSITIONS.

**REFERENCES**

19. PLEASE PROVIDE ON A SEPARATE SHEET OF PAPER A REFERENCE FROM ONE OF YOUR CURRENT TEACHERS <u>AND</u> YOUR GUIDANCE COUNSELOR.
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**ESSAY QUESTIONS**

20. PLEASE ANSWER THE FOLLOWING QUESTIONS ON A SEPARATE SHEET OF PAPER. YOUR ANSWERS SHOULD BE LIMITED TO NO MORE THAN 200 WORDS PER QUESTION (TYPED AND DOUBLE-SPACED).
A. WHAT ARE YOUR EDUCATIONAL/CAREER GOALS AND HOW DO YOU PLAN TO ACHIEVE THEM?
B. WHY IS IT IMPORTANT TO GIVE BACK TO YOUR COMMUNITY ONCE YOU HAVE ACHIEVED YOUR GOALS?
C. WHAT IS THE MOST CHALLENGING OBSTACLE YOU HAVE FACED AND HOW DID YOU OVERCOME IT?

**STATEMENT OF UNDERSTANDING**

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. FURTHER, I (APPLICANT) AGREE TO MEET ALL OF THE REQUIREMENTS SET FORTH BY THE FOUNDATION.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

*The Lloyd D. Smith Foundation reserves the right to revoke any scholarship award if misleading or incorrect information is provided.*

**SUBMISSION DEADLINE: MUST BE POSTMARKED BY APRIL 16 (Yearly)**

**FOR PREVIOUS LDSF SCHOLARSHIP RECIPIENTS WHO ARE REAPPLYING:**

- **Complete Questions 1 through 7**
- Confirm your current College/University information:
  - Identify College/University
  - Provide College/University Address
  - Provide your Student ID
- Request your official College transcript be sent to us **before April 16 deadline**
- Sign and date application

**FOR CURRENT COLLEGE STUDENTS (APPLYING FOR THE FIRST TIME):**

- **Complete Questions 1 through 8**
- Confirm your current College/University information:
  - Identify College/University
  - Provide College/University Address
  - Provide your Student ID
- Request your official College transcript be sent to us **before April 16 deadline**
- Provide your extra-curricular/volunteer activities (Q. 18)
- Submit Essay Questions (Q. 20)
- Sign and date application

**ALL INFORMATION SHOULD BE MAILED TO:**

**LLOYD D. SMITH FOUNDATION  
P.O. Box 10473  
Washington, DC 20020-9994**

**Questions can be emailed to us at:  
[info@lloyddsmithfoundation.org](mailto:info@lloyddsmithfoundation.org)**