



LOWER MERION TOWNSHIP SCHOLARSHIP FUND

BOX 346, ARDMORE, PENNSYLVANIA 19003-0346
610-645-1893 E-mail: lmtsf@lmsd.org

November 2011

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To: All Lower Merion Township Scholarship Applicants

From: The Lower Merion Township Scholarship Fund

Subject: Instructions for Application for 2012-2013 Academic Year

To be eligible to receive a Lower Merion Township Scholarship, you must have graduated from or be a graduating senior at Harriton or Lower Merion High Schools, have been a resident student in the Lower Merion School District for four years and remain a full-time undergraduate student during the time of the grant. A grant can be renewed, annually, for a maximum of eight semesters. Even if you do not start school until the spring semester, you must apply by the deadline.

We are enclosing the necessary forms and instructions to apply for a scholarship grant for the 2012-2013 academic year. You will find:

1. Instructions
2. Application
3. Reference request & reply form
4. Student Record Release Form

PLEASE READ ALL INSTRUCTIONS CAREFULLY. We must have all forms completed and returned to our office by February 15, 2012. Due to an ever increasing number of applicants, we must hold fast to our February 15th deadline. Please also pay attention to deadlines of the schools to which you are applying. If you have questions concerning our instructions, please contact your Guidance Counselor or Fran Guinnane at guinnaf@lmsd.org or at the Scholarship Office, 610-645-1893. You may also write to the Scholarship Fund at the above address. **If you do not follow these directions, we will not be able to process your application.**

INSTRUCTIONS FOR COMPLETING LMTSF APPLICATION

1. The **Student Record Release Form** (enclosed) must be filled out and returned to your Guidance Office by **January 31, 2012**. The Guidance Office will send your transcript to us.
2. The **Application** must be completed and postmarked to our office by **February 15, 2012**. Please advise the person from whom you are requesting your **Reference Letter** (#12 on application) that it is due to our office by **February 15, 2012**.
3. **2010 IRS Statement(s) for both parents** (which will be forwarded to our Financial Aid Consultant), enclosed with your application. If an IRS form was not filed last year, a letter of explanation must be sent with the application.
4. The **CSS/Financial Aid Profile** must be completed via the Internet at www.collegeboard.com. You should register as soon as possible (**preferably no later than December 15, 2011**). It must be completed on time so that your Financial Aid Profile Application is filed by our **February 15, 2012** deadline. You may use your estimated 2010 Tax Information if necessary. Not completing your personal IRS filing is not an excuse for missing the deadline. These figures may be revised later. **The Lower Merion Scholarship Fund's CSS code, #0740**, must be included in your Profile Application. Even if the schools to which you are applying do not require the filing of a Profile Application, you must file with our code number in order to be considered for a LMTSF grant. *Contact your guidance counselor if you feel you may qualify to waive the \$25 application fee.*

If biological or adoptive parents are divorced, separated, or are no longer living in the same household the Noncustodial PROFILE is not necessary, but a 2010 IRS statement must be included for the noncustodial parent. If for any reason, it cannot be provided, please include a letter stating the reason and circumstances with your application.

NOTE: If siblings are applying, only one set of tax information and 1 CSS profile needs to be submitted per family.

5. **FAFSA (Free Application for Federal Student Aid)**. Although not required for this application, we strongly urge you to apply on line at www.fafsa.ed.gov. This may help you obtain financial aid from other sources. It may be helpful to print out a copy of your CSS Profile application to work on the FAFSA, since much of the information will be the same.

2012-2013 SCHOOL YEAR APPLICATION FORM
LOWER MERION TOWNSHIP SCHOLARSHIP FUND

BOX 346, ARDMORE, PA 19003-0346 * (610) 645-1893

lmtsf@lmsd.org

Print or Type in Black ink

1. **Applicant's Name** _____
(First) (Middle) (Last))
Date of Birth _____ Sex _____ Graduation Year _____ HHS/LMHS (Circle one)
Home Address _____
(Street) (Town) (State) (Zip)
Home Phone _____ cell-phone: _____ e-mail _____

E-mail Address to which renewal applications and LMTSF correspondence will be sent: _____

2. **Father's full name** _____ (Circle one) Living Deceased
(First) (Middle) (Last)
Father's Address _____
(Street) (Town) (State) (Zip) (Phone)
Occupation _____ Employer: _____ Phone/e-Mail: _____

3. **Mother's full name** _____ (Circle one) Living Deceased
(First) (Middle) (Last)
Mother's Address _____
(Street) (Town) (State) (Zip) (Phone)
Occupation: _____ Employer: _____ Phone/e-Mail: _____

4. **Guardian's full name** : _____
(First) (Middle) (Last)
Guardian's Address _____
(Street) (Town) (State) (Zip) (Phone)

5. Print the names of the schools you attended, and the grade(s) you attended in each school:
Elementary: _____
Middle: _____
High: _____ **Date of High School Graduation:** _____

6. Some of our **Special Awards** are for students with physical disabilities. If you wish to be considered for such an award, please describe your disability. _____

7. Indicate the extracurricular and community activities in which you participated, the number of years, and any offices, awards, or honors:

8. What paid employment/work experience have you had during high school, including summer jobs? _____

9. What are your educational and/or professional goals: _____

10. List all scholarships or loans for which you have applied or will apply: _____

11. List the names and relationship of members of your immediate family now attending college. Indicate the college and year of expected graduation for each. _____

12. Provide **reference letter** to an individual (counselor, clergy, teacher etc.), requesting it be completed and returned to the Scholarship Office in the envelopes provided before February 15, 2011.

13. List the institutions to which you have applied and indicate the status of your application (no more than the 6 most likely to be selected):

| Institution | Accepted / Pending | Institution | Accepted / Pending |
|-------------|--------------------|-------------|--------------------|
| 1. _____ | | 4. _____ | |
| 2. _____ | | 5. _____ | |
| 3. _____ | | 6. _____ | |

14. On a separate page, **write a one-page autobiographical sketch**. Include experiences which have had important effects upon your development or your educational and occupational plans, and the accomplishment that has given you the greatest satisfaction. Paper clip your autobiographical sketch to this application.
15. I have completed and submitted the following:
- a. A copy of my parents **2010 Income Tax Return** is included with this application.
 If my parents did not file Income Tax Returns, a letter of explanation was sent instead.
 - b. **CSS/Financial Aid Profile Registration** was completed on-line with the Lower Merion Township Scholarship Fund's **CSS code #0740** on _____.
 - c. **Divorced/Separated Parent's Statement**: If applicable, a letter stating why my noncustodial parent could not complete their portion of CSS Profile is included with this application.
 - d. **Transcript**: I submitted the Student Record Release Form to the Guidance office on _____, releasing a transcript to the LMTSF.
 - e. I gave the letter of recommendation and return envelope to: _____ requesting it be completed and returned to you as soon as possible.

I understand, that if awarded, this aid is for one year only and that I must reapply annually, and that I will provide two pictures of myself for the annual brochure. Should I receive a scholarship from any other source, I agree to notify the Lower Merion Township Scholarship Fund Committee immediately. I have read this application and certify that all statements on it are true and complete to the best of my knowledge, and I hereby apply for financial aid from the Lower Merion Township Scholarship Fund.

Signature of Applicant

Date

Check to see that your application is completely filled out. **No application will be processed unless all the Requirements are completed by February 15, 2012.** Please contact the Scholarship Fund Office (610) 645-1893 or your guidance office, if you have any questions about this application.

Lower Merion Guidance Office - (610) 645-1838 * Harriton Guidance Office - (610) 525-1270

Applicant's Name

Address

Date

Dear _____,

I've applied to the Lower Merion Township Scholarship Fund and have need of a reference. I would appreciate your answering the questions on the next page as fully and frankly as possible, and returning it to:

LMTSF
PO Box 346
Ardmore, PA 19003
(or through LMSD distribution)

Your comments will be held in strict confidence and will only be made available to the members of the Selection Committee who make the actual selections.

If you would rather E-Mail, the address is: guinnaf@lmsd.org

The reference is requested as soon as possible and no later than Feb. 15, 2012.

If you are writing a letter for a College or a University for me, a copy of that is acceptable.

I appreciate your help with this.

Sincerely,

Name of Reference

Address

Date

Members of the Selection Committee,

This reference is for: _____, who has requested I provide the following information as part of the Lower Merion Township Scholarship Fund application.

1. How long have you known the applicant?

2. What is your occupation and connection to the applicant?

3. What would be your evaluation of the applicant's character, ability to get along with others and future potential? (Please use the reverse side if necessary).

4. What in your opinion are his/her most significant talents?

5. His / her most significant limitations?

Your Signature

Lower Merion School District

301 East Montgomery Avenue ♦ Ardmore, PA 19003-3399
Phone: 610-645-1800 ♦ Fax: 610-645-9772 ♦ www.lmsd.org



STUDENT RECORD RELEASE AUTHORIZATION FORM TO POST-SECONDARY EDUCATIONAL INSTITUTION

In accordance with the Federal Privacy Rights of parents and students, the following signed consent is necessary in order for Lower Merion School District to release student records.

1. The undersigned hereby consents to the release of all education records about the student (identifying data, birth date, academic work completed, level of achievement, grades, and attendance), letters of recommendation, and such other information as may be requested.

___ YES ___ NO

2. The undersigned hereby consents to the release of disciplinary records as requested by the post-secondary educational institution application process including all suspensions, removals, and expulsions.

___ YES ___ NO*

* If "no" is marked on this form, the high school will indicate this lack of consent on the student's application and the student and parent will be responsible for the decision of the post-secondary educational institution to process the application without this information.

Note: I understand that I am responsible for sending my SAT/SAT Subject Area Tests and/or ACT scores directly from the testing company to the college/university. I understand the Guidance Department **will not** include standardized test scores with the official transcript. To send scores on-line please go to www.act.org for ACT tests and www.collegeboard.com for the SAT tests.

Application Deadline Date: February 15, 2012 Transcript for (circle one): College Coach Scholarship

(Circle one): **Early Decision** **Early Action** **Rolling Admission** **Regular Admission**

College/Scholarship/Agency to Receive Records: **LOWER MERION TOWNSHIP SCHOLARSHIP FUND**

Address of College/Scholarship: **P.O. BOX 346, ARDMORE, PA 19003**

Name of Student (please print) Signature of Student Date Signed: _____

Name of Parent (please print) Signature of Parent or Legal Guardian Date Signed: _____
(required if student is younger than 18)

Date Received: _____ Received By: _____
(Office use only)

A Student Records Release Form Must Be Attached To Each Application