



Application for
The LOMA Society of Ohio
College Scholarship

Before filling out the application, please read the information sheet that describes the program.

To be filled in by applicant	EVERY QUESTION MUST BE ANSWERED FULLY. If the answer is "None" It should be so stated. Please print clearly.
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1. Name _____ Gender _____
 LAST FIRST MIDDLE

2. Date of Birth of Applicant ____ / ____ / ____
 Month Day Year

3. Street Address _____

4. City, State, Zip _____

5. Phone Number ____ - ____ - ____

6. Presently Attending _____
 Name of School

 Address, City, State, Zip

7. Will Graduate in ____ / ____
 Month Year

8. Are you a member of the LOMA Society of Ohio Yes No

9. If "No", name of parent/step-parent who is a member of the LOMA Society of Ohio

Address, if different _____

Phone number, if different ____ - ____ - ____



10. Activities (include hours spent per week for each activity)

a. School activities

b. Outside activities

11. Special Recognition, honors and awards (scholastic, etc.)

12. What university or college do you plan on attending or are you attending?

13. What major have you declared or plan to declare? _____

14. Will the applicant be receiving financial aid (including scholarships)? Yes No

If yes, what type of aid and scholarship percentage? _____

15. If applicant is employed, name of employer and hours worked per week.

16. The following items must be submitted with this application; do not send these separately.

a. A copy of your complete transcript describing the courses taken and grades received from every high school and college you have attended. If you are pursuing a Graduate degree, college transcripts will be sufficient.

b. An essay of 100 words or less of why pursuing an undergraduate or graduate degree is important to you.

Please read carefully before signing

Statement of the Applicant

(This statement must be signed, even if applicant is a Society Member.)

I hereby certify that all of the information on this application is true. Also, I certify that the attached items are legitimate.

Signature of Applicant

Date

Statement of the Society Member

(This statement must be signed, even if applicant is a Society Member.)

I have checked this form for omissions and errors. To the best of my knowledge, the information reported is complete and correct.

Signature of Society Member

Date

This application and all requirements must be received at the address below by the end of day Friday, July 30, 2021.

The LOMA Society of Ohio
c/o Jennifer Cline
3314 Buell Street
Cincinnati, Ohio, 45211

Or email a pdf of all documents to Jennifer Cline (jcline@ipipeline.com).