

***LAKE PLACID GARDEN CLUB, INC.***  
***CONTINUING SCHOLARSHIP APPLICATION***  
***Up to \$1,000***

RETURN BY \_\_\_\_\_

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

Anticipated graduation date: \_\_\_\_\_

GPA as of mid-year (2020-2021 school year): \_\_\_\_\_

Please use the lines below to state your career expectations.

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List any school or community projects, activities, honors, awards, clubs, etc. that you have been associated with during your school years.

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

**\*NOTE—A TRANSCRIPT NEEDS TO BE ATTACHED TO THE APPLICATION**  
Please return to Lake Placid Garden Club, P. O. Box 2193, Lake Placid, FL 33862 (attn.:

scholarship chairman)