

## **LECROY APPLICATION FORM**

LECROY SCHOLARS PROGRAM | DEADLINE: FIRST FRIDAY IN APRIL

| STUDENT INFORMATION:  Name Address   | Social Security # or Student I.D. #                                  |
|--|--|
|  | State Zip Code   |
| •  | Work Phone   |
|  | TVOIR THORE  |
| Current College or High School   | College attending in the fall  |
| High School Graduation Date  | High School GPA  |
| Highest GPA available at your school   | DCCCD GPA  |
| SAT Score ACT Score  | Employment   |
| CAREER GOALS:  |  |
| LEADERSHIP List 3 important leadership accomplishments:  1   |  |
| ACADEMIC ACHIEVEMENT List 3 honors that reflect outstanding academic achievement:  1 2 3   |  |
| ESSAY: On a separate page, write a one-page (500 word minimum) typed essay describing personal characteristics, leadership experiences and academic achievements that qualify you for the LeCroy Scholars Program. |  |
| SIGNATURE OF APPLICANT   | RECOMMENDED BY  (Signature of principal counselor or faculty member) |