

**FRED AND LOUISE LATSHAW SCHOLARSHIP**  
Administered by Legacy Foundation

**APPLICATION**

**INSTRUCTIONS FOR COMPLETING THIS APPLICATION:**

Please type or print all information using blue or black ink. (or complete the online version at [www.legacyfoundationlakeco.org/scholarships](http://www.legacyfoundationlakeco.org/scholarships)) Complete all questions.

*Additional information may be provided on a separate sheet.*

Name \_\_\_\_\_  
(Last) (First) (M.I.)

Address \_\_\_\_\_  
(Street) (City) (Zip Code)

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Not-for-profit Organization you work for \_\_\_\_\_

List the colleges, universities or trade schools you have applied to and the status of the application:

<b>Applied to</b>	<b>Status of application</b>		
	<input type="checkbox"/> pending	<input type="checkbox"/> accepted	<input type="checkbox"/> currently enrolled
	<input type="checkbox"/> pending	<input type="checkbox"/> accepted	<input type="checkbox"/> currently enrolled
	<input type="checkbox"/> pending	<input type="checkbox"/> accepted	<input type="checkbox"/> currently enrolled

Major Field of Study: \_\_\_\_\_

List work experience for the past five years.

<b>Place of Employment</b>	<b>Dates of Employment</b>	<b>Job Title/Duties</b>	<b>Name of Supervisor</b>

List your volunteer activities:

<b>Volunteer Commitment</b>	<b>Date/Yr</b>	<b>Organization Name</b>	<b>Type of duties</b>

List your commitment to community organizations:

<b>Membership in Community Organizations</b>	<b>Date/Yr</b>	<b>Name of Organization</b>	<b>Type of organization</b>

## ESSAY

On a separate sheet of paper, please answer the following three questions. Your response must be typed (no smaller than size 11 font) and double-spaced. **Do not exceed two pages.**

1. Please describe your goals for continuing your education.
2. Indicate how your additional education will impact your employment.
3. Please explain why you believe it is important for not-for-profit agencies or organizations to have committed, well-trained employees.

## CERTIFICATION

The Legacy Foundation, Inc., Lake County's Community Foundation, is the administrator of this scholarship. By completing and signing this form, the applicant agrees to the following:

1. I hereby affirm that the information provided on this application is accurate and complete to the best of my knowledge.
2. I have read and understand the Information and Instructions sheet and have had my questions answered satisfactorily by the Legacy Foundation.
3. I understand that this scholarship may only be used for tuition, fees, and/or book expenses. Checks for tuition and fees will be issued directly to the school. If I choose to use this scholarship for books, I understand that I must contact the Legacy Foundation **before** the beginning of the academic year to receive instructions on disbursement of the funds.
4. I hereby agree to submit a copy of my tuition bill to the Legacy Foundation at the beginning of the academic year. Furthermore, I understand that no tuition checks will be issued without a copy of the tuition bill.
5. I agree to submit my official transcript at the end of the academic year.
6. Any recipient of the \$1,000 scholarship may reapply, however no one recipient may receive more than four awards for a total of \$4,000.
7. The Legacy Foundation, Inc. has my permission to use any general information included in this application, as well as my photo, for publicity purposes.

Please sign and date this application:

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**Applicant's Signature**

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**Date**

**PLEASE SUBMIT THE FOLLOWING TO: Legacy Foundation, Inc.  
1000 E. 80<sup>th</sup> Pl., North Tower 402  
Merrillville, IN 46410**

- Your completed application typed or printed neatly in black or blue ink.
- Your original essay, Typed, double-spaced and no longer than 2 pages
- Two recommendation letters, written by adults other than family members. One must be from the Director or CEO of your place of employment.
- Your most recent official transcript or GED completion verification.

**COMPLETED APPLICATIONS MUST BE SIGNED AND POSTMARKED  
by April 15<sup>th</sup> annually.  
Incomplete Applications will not be considered.**

**Call 219-736-1880 with questions or email: [legacy@legacyfdn.org](mailto:legacy@legacyfdn.org)  
Applications are also available online at [www.legacyfdn.org](http://www.legacyfdn.org)**