

The Glenn Armentor \$10,000 "Pay It Forward" Scholarship of Excellence

Requirements to Apply:

- 1. Must be an incoming freshman to UL Lafayette
- 2. Must have an ACT composite of 19; and English ACT 18 and Math ACT 19
- 3. Must have a 2.5 cumulative high school GPA on a 4.0 scale
- 4. Must be admitted to UL Lafayette
- 5. NOTE: Consideration will be given to a student who has contributed through community services who is "at risk" by virtue of family or economic situation.

Where do you get a Scholarship Application?

• Write a Letter of Interest and send it to:

The Glenn Armentor Law Corporation

Attn: "PAY IT FORWARD" Scholarship of Excellence

300 Stewart St.

Lafayette, La 70501

- Call 337.233.1471 and speak with Wayne Lemoine and let him know your interest and need for The Glenn Armentor \$10,000 "PAY IT FORWARD "Scholarship of Excellence Application
- Email us requesting an application to Scholarship@GlennArmentor.com

What is the deadline?

The deadline to turn in your application is March 1st. The committee will review the applications and an award announcement will be made by mid-April.

What must I include with my application?

- 1. A copy of your 6 or 7 semester high school transcript
- 2. A copy of your ACT or SAT scores
- 3. Make sure all signature lines are filled with proper signatures

MAIL YOUR COMPLETED APPLICATION TO:

UL Lafayette Scholarship Office

P.O. Box 44050

Lafayette, LA 70504-4050

Phone (337) 482-6515

UL LAFAYETTE FOUNDATION SCHOLARSHIP APPLICATION Glenn Armentor "Pay It Forward" Non-Endowed Scholarship of Excellence

DEADLINE DATE: MARCH 1st

ELIGIBILITY REQUIREMENTS:

- 1. Must be an incoming freshman from an Acadiana Parish (Lafayette, Iberia, St. Martin, Acadia, St. Mary, Vermilion, St. Landry and Evangeline)
- 2. Must be a U.S. Citizen or permanent resident
- 3. Must have an English ACT 18 and Math ACT 19
- 4. Must have a 2.5 cumulative core high school GPA on a 4.0 scale
- 5. Must be admitted to UL Lafayette
- 6. NOTE: Consideration will be given to a student who has contributed through community services; who is "at risk" by virtue of family or economic situation. "At risk" will be defined as a student with at least one of the following factors: financial hardship, emotional stresses, environmental negatives, or family circumstances.

I. Personal Background

	Name:			
	LAST	FIRST	MIDDLE INITIAL	SS#:
	Address:			Phone: ((Cell)
	CITY	STA	TE ZII	Email:
	Parish/County:			_
				Date of Birth:
	College Major:			High School Graduation Date:
II.	High School Information	on		
	School Name			Phone # ()
	School Address			
	City		_State	Zip
	Counselor			Phone # ()
III.	Academic Background			
	ACT Scores: English	Math	Read	_ Sci. Resn COMP Test Date
	High School GPA <u>on 4.0 Sca</u>	ale		
I	V. Extra Curricular Acti	vities (you m	ay use an ad	litional sheet)
	igh School Clubs/Organizations and/Chorus/ Debate/Quiz Bowl/		s) Participated SO JR SR	Leadership Positions Held-Appointed and/or elected offices, team captains, etc.Years(s) Participated FR SO JR SR
1.				1
2.				2
3.				3
4.				4

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V.	Respond	to the	following	questions.	You may	v attach ar	n additional :	sheet.

1. What community activities have you been involved in?

2. What are your goals for the future?

- 3. How would this scholarship help you and your family?
- 4. Do you plan to live on campus or commute?
- 5. Please list all work experience. (All jobs, exact dates of employment, number of hours per week and duties)

VI. Financial Information

*Students selected for interview will be required to provide tax information from parents and/or guardians.

Parents: Father's Name: _			Occupation
	LAST	FIRST	
Mother's Name:			Occupation
	LAST	FIRST	
Family Yearly Income _		Father's Inco	ome Mother's Income
Number of Brothers/Sist	ters (excluding	yourself) residing at	t home Number of Brothers/Sisters in college
Number of Brothers/Sist	ters (excluding	g yourself) residing at	t home Number of Brothers/Sisters in college
Number of Brothers/Sist	ters (excluding	g yourself) residing at	t home Number of Brothers/Sisters in college
Number of Brothers/Sist	ters (excluding	g yourself) residing at	t home Number of Brothers/Sisters in college
			t home Number of Brothers/Sisters in college Comments:
		g yourself) residing at	
Signature of School Represent		Date	Comments: I understand my records will be available to donors and Scholarship
Number of Brothers/Sist Signature of School Representa			Comments:

MAIL YOUR COMPLETED APPLICATION TO UL Lafayette Scholarship Office P.O. Box 44050 Lafayette, LA 70504-4050 Phone (337) 482-6515