

LPCAA – VOCATIONAL SCHOLARSHIP

LaPorte County Agricultural Association
Vocational Scholarship Award \$1,500
Limited to High School Seniors & Current LaPorte County 4-H Member

Scholarship Year: 2025-2026

Application Deadline: May 1, 2025

APPLICANT DATA

Last Name _____ First _____ Middle Initial _____ Home
Address _____ City _____
_____ Township _____ Zip Code _____ Phone _____
_____ Date of Birth (MM/DD/YYYY) ____/____/_____
Email Address _____

PARENT OR GUARDIAN DATA

#1:

Last Name _____ First _____ Middle Initial _____
Address _____ Relationship _____
to Applicant _____ Day Telephone (____) _____ Employer _____
_____ Position _____ #2:

Last Name _____ First _____ Middle Initial _____
Address _____ Relationship _____
to Applicant _____ Day Telephone (____) _____ Employer _____
_____ Position _____

VOCATIONAL SCHOOL/TRADE SCHOOL DATA

Name of Vocational, Trade, Etc. School. Use official school names. Do NOT use abbreviations. (Some lines may not apply) School Name _____ State _____

Area of Focus _____ Approx. Cost Per Year \$ _____

Apprenticeship Description (if applicable) _____

OTHER SCHOLARSHIPS APPLIED FOR AND/OR RECEIVED

LPCAA – VOCATIONAL SCHOLARSHIP WORK EXPERIENCE – LAST TWO YEARS

Employer/Position

Dates of Employment

Hours Per Week

SCHOOL ACTIVITIES – List all school activities in which you have participated during the past four years. Attach page if more space is needed.

Activity	No. of Yrs.	Offices Held

4-H ACTIVITIES – List all 4-H projects in which you have participated while you have been in 4-H. Attach page if more space is needed.

Activity/Project/Club	No. of Yrs.	Offices Held

ADDITIONAL ACTIVITIES, AWARDS & HONORS:

LPCAA – VOCATIONAL SCHOLARSHIP ESSAY

- How will your future be impacted by receiving this award?
- Describe your interest in being in a trade and how it will influence your future.
- How has working in this trade benefitted you and what life lessons have you learned?
- What are your long-term goals as they relate to your educational objectives and career?

Your typed response should be on a separate 8.5x11 sheet of paper and limited to 500 words or less. Include your name and the name of the scholarship program at the top of the page.

TRANSCRIPT INFORMATION

Please include a high school transcript of grades.

High School Name: _____ GPA: _____

No. in Class, if known: _____

I acknowledge decisions are final. I certify to the best of my knowledge and belief all the information on this form is correct. If requested, I will provide proof of information. I understand that failure to report all information accurately and completely may result in my disqualification for consideration. Falsification of information may result in termination of any award granted.

Applicant Date _____ Signature of

Parent/Guardian Date _____ Signature of

APPLICATION CHECKLIST

- ☐ Student Essay
- ☐ Student Application
- ☐ Student Transcript

APPLICATION MUST BE RECEIVED BY MAY 1, 2025 TO THE EXTENSION OFFICE OR FAIR OFFICE OR EMAILED TO:

laportefair@gmail.com