



BENJAMIN J. LAMBERT, III SCHOLARSHIP FUND

2018-2019

INTRODUCTION

The Lambert Scholarship in the amount of **\$1,000** is presented by the Henrico Education Foundation and the family of Senator Benjamin J. Lambert, III to assist Henrico County Public School graduates planning to pursue further study or training beyond high school. These funds may be used for tuition, books or other school related costs and will be paid directly to the educational institution.

ELIGIBILITY CRITERIA

Applicants must:

- * • **Submit evidence of leadership skills and a commitment to school and community service**
 - Be a senior planning to pursue further study or training beyond high school
 - Be enrolled in Henrico County Public Schools for at least 3 years
 - Be a permanent U.S. citizen or permanent U.S. resident at the time of application; in some cases, documentation may be required
 - Be pursuing a Standard or an Advanced Studies diploma
 - Possess a minimum GPA of 3.0
 - Submit evidence of involvement in co-curricular activities
 - Have financial need for the scholarship

**Criteria denotes primary focus*

APPLICATION GUIDELINES

- Applications should be completed with care and attention to detail.
- Your essay represents you. It should be typed, double-spaced and free of grammatical errors.
- A school transcript including test scores, SAT and ACT scores must accompany the application.
- Attach a letter of recommendation from a teacher, counselor or principal.
- Scholarship funds will be paid directly to the college or university the student is attending.
- Applications should be submitted to the School Counseling Department by the date designated by the school. It is the responsibility of the student to obtain the due date.
- The scholarship will be awarded at the student's Senior Awards Assembly.

Note: Quotations from the winner's application may be used in Foundation publicity.



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APPLICATION

SECTION I

(TO BE COMPLETED BY APPLICANT – PLEASE PRINT)

NAME OF APPLICANT _____

Last

First

Middle

SCHOOL _____

HOME ADDRESS _____

Number and Street

City

State

Zip

HOME PHONE _____ STUDENT CELL PHONE _____

SECTION II

(TO BE COMPLETED AND SIGNED BY PARENT OR GUARDIAN – PLEASE PRINT)

PARENTS OR GUARDIAN (if either or both parents are deceased, so indicate)

FATHER'S/GUARDIAN NAME _____

ADDRESS _____

OCCUPATION _____

MOTHER'S/GUARDIAN NAME _____

ADDRESS _____

OCCUPATION _____

TOTAL ANNUAL INCOME \$ _____

NUMBER OF DEPENDENTS OTHER THAN APPLICANT _____ AGES _____, _____, _____, _____

Date Signed

Parent's or Guardian's Signature

SECTION III
(TO BE COMPLETED AND SIGNED BY PARENT OR GUARDIAN – PLEASE PRINT)

STUDENT'S COLLEGE OF CHOICE (Check One): • Community College • Four-Year College/University

NAME OF COLLEGE STUDENT PLANS TO ATTEND: (If decision has not yet been make, list colleges to which you have applied. Please note if you have been accepted at this time.)

CO-CURRICULAR ACTIVITIES INCLUDING ATHLETICS, HONORS OR AWARDS:

HOW DID YOU SPEND YOUR TIME LAST SUMMER? _____

WHAT PART-TIME EMPLOYMENT HAVE YOU HAD? _____

WHAT ARE YOUR EDUCATIONAL AND/OR VOCATIONAL GOALS FOR THE FUTURE? _____

ARE YOU APPLYING FOR OTHER SCHOLARSHIPS? YES _____ NO _____

IF YES, COMPLETE THE FOLLOWING: NAME OF SCHOLARSHIP (S) _____

VALUE: \$ _____

SECTION IV

(TO BE COMPLETED BY STUDENT)

In a typed, double-spaced essay of no more than 500 words, explain how your leadership skills and a commitment to school and community services will help you reach your future career goals and why this scholarship is important in order to reach those goals. You may also include any other information not previously given that will explain why you should be the recipient of this honor. **Include your name and high school at the top of the page of your essay.**

SECTION V

(TO BE COMPLETED BY SCHOOL COUNSELOR)

Please attach a copy of the student's transcript.

Student's Current G.P.A. _____ Standing in the Class _____

Student's Latest SAT or ACT Scores: Verbal _____ Math _____

Other Appropriate Testing
Information _____

CERTIFICATION

I have reviewed the information contained herein with the student and certify that it is accurate and correct to the best of my knowledge and belief.

Date

School Counselor's Signature