

**Logan Rogersville Alumni Association
Scholarship Application
\$1,000.00**

Name: _____

Address: _____

Phone: _____

School you plan
to attend: _____

Tuition (per
semester) _____

Please write why you feel deserving of this scholarship and any other information about yourself which might aid the committee in making its selection; for example: financial need, area of study, career goal or other scholarships that you are receiving.

The scholarship money is paid directly to the school of your choice.

Please attach an additional sheet to this form with any additional information.

Thank you and good luck!