





Name \_\_\_\_\_

Kiwanis Club of Lakeport  
Arlin Pischke Memorial **Scholastic** Scholarship  
Application 2020

*Section 1: Student Contact Information*

Name of Applicant \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian's Name(s) \_\_\_\_\_

\_\_\_\_\_

Name of High School \_\_\_\_\_

Counselor's Name \_\_\_\_\_

*Section 2: Student Profile*

GPA \_\_\_\_\_

List in order of preference the Colleges or Universities you are considering:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_







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**Section 3: Personal Statement**

Describe why you want and need this scholarship.

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Describe your personal goals.

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Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_



Name \_\_\_\_\_

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**Section 4: Letter of Recommendation**

Please provide a letter of recommendation from a teacher or school administrator. It should summarize the characteristics that would suggest the applicant's capabilities of achieving his or her life goals. Please include any background you believe would be helpful. (One page only, please)

Applicant's Name \_\_\_\_\_

School \_\_\_\_\_

Your Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

**Please attach:**

- 1) Letter of Recommendation
- 2) Transcript.

**MAIL to: Kiwanis Club of Lakeport  
ATTN: Scholarship Committee  
P O Box 1027  
Lakeport, CA 95453**

***APPLICATIONS RECEIVED AFTER Monday, June 1, 2020  
WILL NOT BE CONSIDERED.***