

**WEST VIRGINIA CEMETERY & FUNERAL ASSOCIATION
LAJEANA ALDREDGE SCHOLARSHIP FUND APPLICATION**

Please type or print legibly.

PART A: Personal Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email: _____

Date of Birth: ____/____/____ Place of Birth: _____

Are you a WV resident? Yes No

Are you a US Citizen? Yes No Other: _____

Dependents (Number and age):

Name of industry that recommended you? _____

Name: _____ Phone: _____

PART B: Parent's Information (Complete only if you are a declared dependent on your parent's federal income tax for the last tax year.)

Father's Name: _____ Deceased? Yes No

Address: _____

City: _____ State: _____ Zip: _____

Father's Occupation: _____

Name of Company: _____

Annual Income (Tax Form 1040, Line 32, of last year): _____

Mother's Name: _____ Deceased? Yes No

Address: _____

City: _____ State: _____ Zip: _____

Mother's Occupation: _____

Name of Company: _____

Annual Income (Tax Form 1040, Line 32, of last year): _____

Other Dependents in Family:

Name: _____ Age: _____

Did they attend college last year? ___Yes ___No

Fees paid by parents? ___Yes ___No

Name: _____ Age: _____

Did they attend college last year? ___Yes ___No

Fees paid by parents? ___Yes ___No

Name: _____ Age: _____

Did they attend college last year? ___Yes ___No

Fees paid by parents? ___Yes ___No

Part C: Personal Financial Statement (Your estimated expenses and the support you expect to receive during the next school year.)

Support

Yourself: _____

Parents: _____

Friends, Relatives: _____

Personal Savings: _____

Academic year job: _____

Summer employment: _____

Other (VA, Rehab, etc.): _____

Total Support: _____

Expenses

Tuition: _____

Room: _____

Board: _____

Other (Please list): _____

Total Expenses: _____

Part D: Spouse's Information (If Applicable)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Occupation: _____ Company Name: _____

Annual Income (Tax Form 1040, Line 32, of last year): _____

Part E: Employment Status (If Applicable)

Occupation: _____

Company Name: _____

Annual Income (Tax Form 1040, Line 32, of last year): _____

Part F: Educational Background

High School: _____

City: _____ State: _____

Year(s) Attended: _____ Year Graduated: _____

College(s): _____

City: _____ State: _____

Year(s) Attended: _____ Year Graduated: _____

College(s): _____

City: _____ State: _____

Year(s) Attended: _____ Year Graduated: _____

Part G: Military Background (If Applicable)

Branch: _____

Period of Service: _____

Rank Obtained: _____

Date of Discharge: _____ Type: _____

Part H: School & Community Involvement

School Activities: _____

Dates of Participation: _____ Hours per week: _____

Community Activities: _____

Dates of Participation: _____ Hours per week: _____

Part I: Work Experience

Job Held Employer: _____

Dates of Employment: _____ Hours per week: _____

Job Held Employer: _____

Dates of Employment: _____ Hours per week: _____

Job Held Employer: _____

Dates of Employment: _____ Hours per week: _____

The balance of the application process requires narrative answers designed to help the Scholarship Committee to know you and your plans. Please use a separate sheet of paper for each question below.

Part J: Choosing Your Career

Describe the process you used and the experiences you underwent in your decision to enter your profession. Also, describe how it relates to the cemetery and funeral profession.

Part K: Tell Us about Yourself

Write a brief essay telling the Scholarship Committee about yourself.

All applicants must submit the following with scholarship application:

- Complete and return the scholarship application to:
WVCFA Attn: Scholarship Committee
18 California Avenue Charleston, WV 25311
- Letter of Recommendation from someone able to comment on the applicant's personal qualifications and professional promise.
- Transcript of all high school work.
- Transcript of all college work.

The Scholarship Committee, in its deliberations, takes into careful consideration many factors about each applicant, including:

- Financial need.
- Academic performance.
- Extracurricular and community involvement.
- Recommendation letter submitted with scholarship application.
- Articulateness of scholarship application itself.

I, _____, certify that the above information is true to the best of my knowledge and can be verified by proper documentation if required.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

DATE RECEIVED: _____ SENT TO COMMITTEE: _____ DATE ACCEPTED: _____ DATE REJECTED: _____