



[The Louisiana Veterans Foundation Scholarship Application](#)

Applicant Information:

Date: _____

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

E-mail Address: _____

Military Affiliation: _____

School Information:

College/University/Technical School: _____

Department: _____

Address: _____

City/State/Zip: _____

Declared Curriculum/Major: _____

Overall GPA: _____ Major GPA: _____

List two references that are current or past professors or teachers of the applicant, both references must write a letter of recommendation to support the application.

Reference 1: _____

Address: _____

City/State/Zip: _____

Phone: _____

Number of Years Acquainted with the applicant: _____

Reference 2: _____

Address: _____

City/State/Zip: _____

Phone: _____

Number of Years Acquainted with the applicant: _____

A transcript certified by the school must be submitted with the application.

List recent awards, honors, and related work experience: _____

Attach a brief essay on career goals.