



**Locksley Anthony Henry Scholarship Foundation**

830 Lenox Road  
Brooklyn, NY 11203  
lahenry55@gmail.com

Please type or print your answers clearly. If application is illegible it will be returned to you.

1. Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

2. Email address: \_\_\_\_\_

3. Mailing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

4. Daytime Telephone Number: \_\_\_\_\_

5. Date of Birth: \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

6. I certify that I am a United States Citizen or a permanent resident of the United States of America (Check one)      YES       NO

7. Current school I am enrolled in: \_\_\_\_\_

Street: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

8. I will be attending the following college/university in the Fall of 2014:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Proof of acceptance or current student enrollment from the above school is required prior to receipt of funds.

9. Grade Point Average (GPA): \_\_\_\_\_ (On a 4.0 scale)

Attach proof of GPA. Your most recent unofficial or official transcript is required.

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

10. Name & address of parent(s) or legal guardian(s):

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

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone of parent or legal guardian: \_\_\_\_\_

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

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone of parent or legal guardian: \_\_\_\_\_

11. What is your major/degree? \_\_\_\_\_

12. List your academic honors, awards and membership activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. List your community service activities, hobbies, outside interests, and extracurricular activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**14. Personal Essay**

Please answer the following question in 500 words or less. Essay must be typed and double space.

*If education was a key, what door would it unlock for you?*

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

**STATEMENT OF ACCURACY:**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote Locksley Anthony Henry Scholarship Foundation's scholarship program.

I hereby understand that if chosen as a scholarship winner, according to Locksley Anthony Henry Scholarship Foundation, I must provide evidence of enrollment/registration at an accredited, post-secondary institution before my scholarship funds can be awarded.

Signature of scholarship applicant: \_\_\_\_\_

Date: \_\_\_\_\_