



2020 Application
Livonia Youth Commission/SPREE Memorial Scholarships
(in conjunction with the Livonia Anniversary Committee, Inc. – Spree 70)

Requirements:

- A. Must be a Livonia resident attending school in the Livonia or Clarenceville Public School District or a Livonia resident attending a private school
- B. Must be applying to a community college, university or accredited technical school in Michigan.
- C. Must be a member of the graduating class of 2020.
- D. Financial needs will be considered. Please include a copy of parent/guardian's Federal 1040, W2s and 1099s. These documents must accompany the application to be considered.
- E. A transcript of grades must accompany the application.
- F. Application must be post marked no later than **Friday April 24, 2020**. Any applications post marked after that date will not be considered.
- G. Please attach additional reference letters from three adults, other than relatives or school personnel. Please note that all references must be hand signed. No exceptions.

Completed application should be sent to:

Livonia Youth Commission
Livonia City Hall
33000 Civic Center Drive
Livonia, MI 48154

You may hand deliver your application to the 5th floor of Livonia City Hall on or before April 24, 2020

For more information, call the City of Livonia at (734) 466-2540.

Scholarships will be paid directly to the school of the student's choice.

Student Information:

Name _____ Birth date _____

Address _____ Zip _____ Phone _____

High school now attending _____

Michigan school for which scholarship is requested (if already decided):

Name	Address	City	Zip
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Have you applied for entrance? _____ Have you been accepted? _____

What course of study will you pursue? _____

Have you received any other scholarships? (please list)

Do you have any work or volunteer experience related to this field? If yes, please list.

Student's Work Record:

Please list all jobs you have had.

Employer	Job Title	Years Worked	Hours Per Week
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Please give a brief description of your job responsibilities and duties.

Student's Activity Record:

Please list any community-related activities, including awards you have received (other than school).

Please list all school activities, including any awards you have received.

Please list all the activities that you have volunteered for on your own.

References:

Student's Name _____

Attention counselor: Please give your recommendation of this student, including personal characteristics, mental attitude, social adjustment, seriousness of purpose, achievement related to ability, class standing or rank, grade point average, etc. (attach additional page if necessary.) Please include a copy of transcript. Please return this form promptly to the student. Student's application cannot be processed without your information.

Signed _____ Title _____

