



## **Louis Bunyan Memorial Scholarship - A 4-SITE Program**

711 H Street; Suite 200, Anchorage, Alaska 99501 Tel: 1-888-795-5151 Fax: (907) 278-5150

4-SITE

### **RENEWAL APPLICATION**

**Please check semester applying for:**

Fall Semester  Winter/Spring Semester

Today's Date: \_\_\_\_\_

#### **PERSONAL INFORMATION**

\_\_\_\_\_  
Name Social Security Number

\_\_\_\_\_  
Home (Permanent) Mailing Address E-mail Address

( ) ( )

\_\_\_\_\_  
Home (Permanent) Telephone Number Telephone Number while in school

\_\_\_\_\_  
Address while attending school

#### **SCHOOL ATTENDING FOR APPLICATION PERIOD**

\_\_\_\_\_  
School Name

\_\_\_\_\_  
School Address

( )

\_\_\_\_\_  
Telephone Number of School's Admissions Office Date of Enrollment

\_\_\_\_\_  
Course of Study: Major/Minor Class Standing

#### **PERSONAL STATEMENT**

In the event that you are not returning to school the next semester, you must submit a **Final Report**, which is referenced in the **Terms of Award** you signed at the beginning of the semester.

If you are returning to school, your final report is not needed. However, you are required to write a **two page**, typed/written statement addressing the following:

- a) How your semester is progressing (description of course work, academic performance, plans for upcoming semester, etc.).
- b) Explain in detail how your current LBMS scholarship funds were/are being used.
- c) Your financial needs (be specific about each line item on page 2).

<b>FINANCIAL INFORMATION</b>
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**1) Estimated income for \_\_\_\_\_ Semester 20\_\_\_\_\_**

Personal and Family Contribution	\$ _____	semester
Student Loan	\$ _____	semester
Bureau of Indian Affairs	\$ _____	semester
AVCP	\$ _____	semester
Calista	\$ _____	semester
Joseph Paniyak Scholarship	\$ _____	semester
AVEC	\$ _____	semester
Pell Grant	\$ _____	semester
_____ School District	\$ _____	semester
Other: _____	\$ _____	semester
Other: _____	\$ _____	semester
<b>TOTAL CONTRIBUTIONS:</b>	<b>\$ _____</b>	<b>semester</b>

**2) Estimated expenses for \_\_\_\_\_ Semester 20\_\_\_\_\_**

Tuition	\$ _____	semester
Fees (lab, activity)	\$ _____	semester
Books and Supplies	\$ _____	semester
Dormitory/Housing	\$ _____	semester
Meal Ticket/Groceries	\$ _____	semester
Travel to/from Campus	\$ _____	semester
Other (please specify)		
_____	\$ _____	semester
_____	\$ _____	semester
_____	\$ _____	semester
_____	\$ _____	semester
<b>TOTAL EXPENSES:</b>	<b>\$ _____</b>	<b>semester</b>

**3) Unmet Need/Scholarship Request**

<b>TOTAL CONTRIBUTIONS:</b>	<b>\$ _____</b>	<b>semester</b>
<b>TOTAL EXPENSES (minus):</b>	<b>\$-- _____</b>	<b>semester</b>
<b>TOTAL Scholarship Request</b>	<b>\$ _____</b>	<b>semester</b>

## APPLICATION CHECKLIST

- \_\_\_\_\_ Completed renewal scholarship application
- \_\_\_\_\_ Personal statement
- \_\_\_\_\_ Copy of most recent transcript(s)
- \_\_\_\_\_ Copy of registration from accredited institution

## STATEMENT OF HONESTY

I certify that the facts and information in this application and in any attachments or supporting documents are true and completed to the best of my knowledge. I understand that any falsification, misrepresentation, or omission, as well as any misleading statements, will void this application and I will be declared ineligible for financial assistance from the Louis Bunyan Memorial Scholarship.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Mail application to:

**Louis Bunyan Memorial Scholarship  
711 H Street, Suite 200  
Anchorage, AK 99501**