



Fantastic **U**nique **N**eat
A Week-long Summer Program
For
Young Women
July 6-11, 2008

Scholarship Deadline: March 31, 2008
(Post Marked/Date Stamped)

Scholarship Application Form

Applicant Name:

Mailing Address:

Telephone Number:

We would encourage you to seek sponsorship/support from your local community based groups who would benefit from your participating in our program.

Have you or your family done anything to raise money for LEARN to LIVE Together, Honors Leadership Academy for Young Women in your community by contacting religious, service, community groups?

Yes _____ No _____

If yes, please give details of results:

Should the review of your Scholarship Application be based on (circle one):

Merit or **Need**

Please continue your application on the reverse.

LEARN to LIVE, Inc
501(c)(3) Non Profit Organization
Tel: 678-890-8780

P. O. Box 876
Carrollton, GA 30112
Email: Director@learn-to-live.com
Website: www.LEARN-to-LIVE.com

If applying for **Merit** reasons, please enclose an essay (*no longer than one double spaced printed page*) on the following topic:

Does Diversity matter? If yes, why? If not, why not?
How do you deal with Diversity? Give concrete, anecdotal examples from your own life.
Can we stand strong when we are diverse? How? Provide an explanation.

If applying for **Need** reasons, please provide us following information:

Occupation of Mother or Guardian:

Business Address:

Occupation of Father or Guardian:

Business Address:

Total Annual Household Income:

(if income is less than \$40,000, please attach a copy of your parents'/guardians' most current Federal 1040 Income Tax Form, Pages 1 & 2)

Names and ages of children in your family supported by your parents/guardians:

Please specify any special needs, hardships or extenuating circumstances you would like to have considered by our team (*attach no longer than one double spaced printed page*)

Alternatively, submit your Scholarship Application on-line at:

www.LEARN-to-LIVE.com

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