

Scholarship Application

Dr. Adrian R. Lawler Exchange Student Scholarship

Name_____

Address_____

City_____ State_____ Zip_____

Phone_____

Date of Birth_____

Name of Parents/Guardians_____

Address_____

City_____ State_____ Zip_____

Phone_____

Applicant's School/College_____

Year in School/College_____

Briefly describe your proposal for use of scholarship funds_____

Amount of scholarship you are seeking_____

Checklist:

- ___ One page essay
- ___ Brief resume
- ___ Three references (mailed or emailed directly to the Foundation)
- ___ A doctor's certificate attesting to the student's physical ability to travel abroad
- ___ School verification of the applicant's enrollment in Oak Ridge schools and certification of a grade average of B+ (3.50)
- ___ Signed Release of Liability
- ___ Last semester college transcript (if applicable)
- ___ Short description of Study Abroad program you are attending

Please return to: Jessica Steed
Oak Ridge Public Schools Education Foundation
P.O. Box 117 MS-22
Oak Ridge, TN 37831
Or email it to:
Jessica.steed@orau.org