



# The Laurie Malone Scholarship Educational Application

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## SECTION A: APPLICANT/STUDENT INFORMATION

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Gender/Sex: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Nationality: \_\_\_\_\_

Home Address:  
\_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## SECTION B: FAMILY INFORMATION

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Street address \_\_\_\_\_ Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Phone Number \_\_\_\_\_

## SECTION C: HIGH SCHOOL INFORMATION STUDENT IS CURRENTLY ATTENDING

Name of School \_\_\_\_\_ Grade/Class \_\_\_\_\_

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

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Student GPA \_\_\_\_\_

- **Student must include a copy of your official transcript obtained from the School Registrar.**

Signature of School Registrar: \_\_\_\_\_

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

## SECTION D: STUDENT QUALIFICATIONS

Individuals applying for this scholarship must be a resident of the United States and will be attending post high education at one of the following: Trade School, Community College, or University.

Individual qualifications to apply for the **Laurie Malone Scholarship**:

- Individuals must maintain a GPA between 2.0-4.0 in high school
- Individual must participate in either extra-curricular or community service activities
- Individuals must provide an official copy with seal of their student transcript provided by school recorder
- Individual must provide documentation of their classification as medically fragile or at-risk
- If you meet the qualifications listed above, please complete the application found [in the link](#) at the end of this page

## SECTION E: STUDENT QUESTIONNAIRE

1. What hardship/disabilities have you incurred in your life that would make you qualify for this scholarship?

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2. List any academic honors, awards, memberships, and community service activities while in high school.

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3. How will this scholarship assist you in achieving your future educational goals?

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Signature is required from all applicants. If the applicant is a minor, all legal guardians must sign this application. I (we) stipulate that the information included in this application is true to the best of my (our) knowledge. Further, I (we) understand that the presence of inaccurate information in this application could result in the need for re-evaluation/rejection of this application by K2 Adventures Foundation.

\_\_\_\_\_  
Signature of Applicant or Parent/Legal Guardian

\_\_\_\_\_  
Printed Name of Applicant or Parent/Legal Guardian

\_\_\_\_\_  
Date