

**Central Lafourche High School and Bollinger Shipyards  
Partners In Education  
Community & Technical College Scholarship**

*Please type answers on scholarship application.*

**Bollinger Shipyards Partners In Education Community & Technical College Scholarship**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_ **email:** \_\_\_\_\_  
**Telephone #:** \_\_\_\_\_  
**Father:** \_\_\_\_\_ **Mother:** \_\_\_\_\_  
**Occupation/Employer:** \_\_\_\_\_ **Occupation/Employer:** \_\_\_\_\_  
**Siblings:** (How Many) \_\_\_\_\_

**Gross Family Income:** *(Click appropriate box)*

Under \$50,000     \$50,000--\$100,000     \$100,000--\$200,000     \$200,000 plus

**Other sources of Financial Aid** *(anticipated grants, scholarships, TOPS, etc.):*

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**Job History of Applicant:**

<b>Employer:</b> _____	<b>Employer:</b> _____
<b>Position:</b> _____	<b>Position:</b> _____
<b>Wages:</b> _____	<b>Wages:</b> _____
<b>Duration of Employment:</b> _____	<b>Duration of Employment:</b> _____

**Educational Plans:**

Anticipated Major: \_\_\_\_\_  
School you plan to attend: \_\_\_\_\_

**Did you letter in a sport?** *(click appropriate box, if yes, specify sport(s))*

Yes     No    Sport: \_\_\_\_\_

**If any member of your immediate family belongs to the organization offering the scholarship you are applying for, indicate their names and relationship to you below:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Personal Testament:**

I certify that the information provided in this scholarship application is correct to the best of my knowledge. I hereby give the scholarship selection committee permission to use this information in their deliberations. I allow my academic transcript to be released to the scholarship committees.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**For Central Lafourche Counseling Center Use Only!**

\_\_\_\_\_ \*ACT \_\_\_\_\_ GPA \_\_\_\_\_ RANK / \_\_\_\_\_  
\*ACT score optional

**Verified by:** \_\_\_\_\_

***Extraordinary Consideration (Please be specific):***

*Each student has the option to answer this question if he/she has faced extra challenges in life, such as: battling/surviving cancer, is/was homeless, lost home due to hurricane, lost parent, has moved frequently, has a learning disability, etc.*

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**Central Lafourche High School and Bollinger Shipyards  
Partners in Education Scholarship  
For Community & Technical Scholarship**

**Value: One \$1,000 scholarship distributed at \$250 per semester for 4 semesters.**

1. Applicant is a *graduating senior of Central Lafourche High School*.
2. Applicant must have a GPA of 2.5 or better.
3. Applicant may choose to attend any accredited Community / Technical school of his or her choice.
4. The applications will be reviewed by a scholarship selection committee. Members of the committee will be designees of Bollinger Shipyards Board of Directors. The committee will select students for first, second and third choice.
5. The Bollinger Shipyards Scholarship will be paid through a check from Bollinger Shipyards. One-fourth will be paid at the beginning of each of four consecutive semesters.
6. At the end of each semester, the recipient will be required to show evidence that he or she has maintained a 2.5 average (per semester, not cumulative), enrolled a minimum of six hours and registered for the next semester, or forfeit the remainder of the scholarship. This must be presented to Ms. Denise Martin for review and authorization of a payment for the subsequent semester.
7. Some consideration will be given for the applicants whose parent(s), step-parent(s) or grandparent(s) is/are employed at a Bollinger Company.

**RETURN YOUR APPLICATION TO CENTRAL LAFOURCHE GUIDANCE DEPARTMENT.**

**NO APPLICATIONS WILL BE GIVEN OUT AFTER THE SCHOOL DEADLINE!**