

**Leo-Only Inc.**  
**Scholarship Program**  
**\$8000 (\$2,000/yr. for 4 years)**  
*Based on Financial Need, Leadership and Scholarship*

FOR ANY HIGH SCHOOL SENIOR OR CURRENT COLLEGE STUDENT IN AN UNDERGRADUATE PROGRAM. Any student in the graduating class of a high school, current college student, or its related equivalent within the jurisdiction of LEO-ONLY, may file an application. If the applicant is attending college, all corresponding grades must be submitted to be considered for the award.

**All applicants must have a parent be or eligible to be a member of LEO-ONLY on the date the application is filed.**

This application must be filed with Lin Polen, Scholarship Chair of Spouses of LEO-ONLY, 2025 High Meadow Lane, Lock Haven, Pa. 17745 no later than the published date. Only one application may be filed per student.

We require a Social Security number for our records. If you do not have one, you should apply at your nearest Social Security Office. There is no charge to obtain this number.

Financial need, leadership and scholarship, as well as citizenship, personality, perseverance, and resourcefulness are the criteria by which applicants will be judged. Students of outstanding merit have the best chance to win our award. Experience indicates students with high scholarship ratings, excellent leadership qualities and a well-rounded personality generally qualify in the group given final consideration. Of course, financial need is a very important part of the formula.

*Important: Applications become property of LEO-ONLY, no materials will be returned.*

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Last First M.I.

Street Address: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_  
City/State/Country

Are you currently an American citizen? \_\_\_\_ Yes \_\_\_\_ No  
(Resident alien does NOT apply. Applicants MUST be a citizen on date application is signed)

If you were not born an American citizen, but are a Naturalized citizen, give date, place (Office or Court) & Naturalization number.

Date \_\_\_\_\_ Place \_\_\_\_\_ Number \_\_\_\_\_

**Schools Attended (9<sup>th</sup> through 12<sup>th</sup> grades)**

Name of School \_\_\_\_\_ Period Attended \_\_\_\_\_

Did school offer honor courses ? \_\_\_\_ Yes \_\_\_\_ No

Did you participate? \_\_\_\_ Yes \_\_\_\_ No

Name of School \_\_\_\_\_ Period Attended \_\_\_\_\_

Did school offer honor courses ? \_\_\_\_ Yes \_\_\_\_ No

Did you participate? \_\_\_\_ Yes \_\_\_\_ No

Name of College if applicable \_\_\_\_\_ Period Attended \_\_\_\_\_

Date applicant will graduate \_\_\_\_\_ Class Rank \_\_\_\_\_ No. in Class \_\_\_\_\_

List your Best ACT score \_\_\_\_\_ List your best combined (Reading & Math) SAT score \_\_\_\_\_

\_\_\_\_\_ Attach official high school transcript from the beginning of grade 9 to due date of application.

\_\_\_\_\_ Attach SAT or ACT test scores (photocopies are acceptable)

\_\_\_\_\_ Attach One but no more than THREE current dated, signed one-page letter of recommendation.

\_\_\_\_\_ **Attach a statement of 350 word or less stating: a personal challenge you were faced with during high school, how you overcame it, and what resources you used to help meet this challenge. The essay must be signed and dated.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### Honors and Awards

Include scholastic, extracurricular, and civic honors and awards during grades 9 through 12 or College

Please state the nature of awards and grade won: i.e., Girl Scout Gold Award, 12

Do NOT include awards such as Honor Roll or Perfect Attendance

1 _____	9 _____
2 _____	10 _____
3 _____	11 _____
4 _____	12 _____
5 _____	13 _____
6 _____	14 _____
7 _____	15 _____
8 _____	16 _____

### Positions of Leadership

State name of organization, position and grade(s) position was held from grades 9 through 12 or college organization: i.e., Key Club, President, 11

1 _____	5 _____
2 _____	6 _____
3 _____	7 _____
4 _____	8 _____

### Activities and Organizations

Please include all scholastic, extracurricular, and civic organizations that you participate in/have participated in. Please indicate the length of time you have participated in each organization

_____	High School or College (please indicate)			
	1	2	3	4
_____	1	2	3	4
_____	1	2	3	4
_____	1	2	3	4
_____	1	2	3	4
_____	1	2	3	4



## Your College Plans

State your educational goals for enrollment in an American college or University. Include your planned course of study.

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_

Have you been granted scholarship aid?  Yes  No If yes, give details \_\_\_\_\_

Do you intend to apply for financial aid at the college(s) you plan to attend?  Yes  No If so, give details: \_\_\_\_\_

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**Parental Financial Analysis** *(Must be complete to be considered for a scholarship. If this portion of the application is incomplete, the application will be automatically disqualified)*

Father's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Stepfather's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Stepmother's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Custodial Parent's Marital Status:

Mother:	<input type="checkbox"/> Married	<input type="checkbox"/> Widowed	<input type="checkbox"/> Divorced*	<input type="checkbox"/> Remarried**	<input type="checkbox"/> Separated*
Father:	<input type="checkbox"/> Married	<input type="checkbox"/> Widowed	<input type="checkbox"/> Divorced*	<input type="checkbox"/> Remarried**	<input type="checkbox"/> Separated*

\*Please indicate how long your parents have been separated or divorced? \_\_\_\_\_ Please read instructions concerning custodial parents.

\*\* Please include stepparent's income in the appropriate section and reading instructions concerning custodial parents

**CUSTODIAL PARENTS** – If your parents are divorced or separated, answer the questions for the parent with whom you lived the most in the past 12 months. For example, if you lived with your mother more than your father, you would count your mother, if you lived with your father instead of your mother, you would count your father. If you lived with both parent's equal number of days in the past 12 months, you would count the parent who provided you the greatest amount of support. Support would include material as well as financial help. Material things would include cars, clothing, medical and dental payments, etc. If that parent has remarried, you must include the stepparent's financial information.

**Note:** If family has divorced or separated and the custodial parent has not remarried, applicant must provide financial information on non-custodial parent. If whereabouts are unknown, please explain in parent's statement.

INDEPENDENT STUDENT – We will not accept an applicant as an independent student, unless the student is or has been a ward of the Court. We require a copy of the Court Document or a Notarized letter from an appropriate County Agency (Social Services) certifying such status.

Whenever the word “parent” (mother or father) is used, it also means stepparent.

**Parental Financial Analysis** *(Must be complete to be considered for a scholarship. If this portion of the application is incomplete, the application will be automatically disqualified)*

What is your parent’s monthly rent or mortgage payment? \$ \_\_\_\_\_

If you have not filed your tax return, you must estimate your income for the current tax year.

- A. Combined Annual Income this tax year (earned from work) \$ \_\_\_\_\_ (A)
- B. Other taxable income from parents’ 1040 (all schedules) \$ \_\_\_\_\_ (B)
- C. Parent(s) Income (Add lines A & B) \$ \_\_\_\_\_ (C)
- D. All non-taxable income not included above (including pensions, IRA, etc.) \$ \_\_\_\_\_ (D)
- E. GROSS INCOME (total lines C and D) \$ \_\_\_\_\_ (E)
- F. Number of dependent children living in your household # \_\_\_\_\_ (F)
- G. Current Tax Year Medical & Dental expenses not paid by insurance \$ \_\_\_\_\_ (G)
- H. Value of home if you were to sell it today \$ \_\_\_\_\_ (H)
- I. Amount of unpaid mortgage \$ \_\_\_\_\_ (I)
- J. Home equity (Subtract line H-I) \$ \_\_\_\_\_ (J)
- K. Value of Assets (bank Accounts, CD’s, Stocks, Rental Property, etc.) \$ \_\_\_\_\_ (K)
- L. TOTAL VALUE OF NET ASSETS (Add lines J and K) \$ \_\_\_\_\_ (L)

Amount student has from work, savings, assets, etc. \$ \_\_\_\_\_

Parent Certification: We have checked this form for accuracy. The information is correct and completed to the best of our ability.

Parent/Guardian Statement: Parent/Guardian shall present a statement of 200 words or less summarizing the family’s obligations and resources. The statement needs to illustrate the applicant’s need for financial assistance. The statement must be signed and dated.

X \_\_\_\_\_ Date: \_\_\_\_\_

X \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\* This is a new scholarship program... LEO-ONLY will accept applications from LEO children currently in the their first through third year of college with a 2026 anticipated graduation date)\*\*\***

**After the scholarship is awarded, it is NOT the responsibility of LEO Only to contact the winners to request grades, name and address where the check is to be mailed, along with the student ID number. If this is not received for 2 concurrent semesters, the scholarship will be considered null and void and will not be reinstated for that student. This also disqualifies the student from reapplying at a later time.**