



4 YEAR DEGREE APPLICATION

# Black River Audubon Society LCCC Scholarship

## Student Application To be used for a 4 year degree

### Applicant Information

Please complete application, attach all required documentation and send to Black River Audubon Society, P.O. Box 33, Elyria, OH 44036 by April 1, 2025.

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Are you a resident of Lorain County? YES NO

Are you able to provide documentation that shows that you have earned 12 college level credit hours or more? YES NO

(Documents must be attached to application upon submission)

Do you intend to complete a 4-year degree in a field of conservation (environmental science, forestry, marine or wildlife biology, sustainable agriculture, etc.)? YES NO

If yes, what is your current Major: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO

College: \_\_\_\_\_ Address \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Current GPA: \_\_\_\_\_

*(Please attach a copy of transcript to application)*

**Other:** \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Area of study: \_\_\_\_\_

**References**

*Two letters of professional recommendation are required. Please list references of letters and attach the documents to this application when submitted.*

---

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

---

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

## Personal Experience

Describe your experience of participating in environmental activities or other forms of community involvement:

Describe your career goals relating to conservation:

In a few words, describe your financial situation and what this scholarship would mean to you:

---

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*I understand that if I am selected for this scholarship, funds will be released directly to the college that I will be attending the Fall semester of contiguous year and only upon submitting proof of enrollment.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_