



# Leadership Johnson County

## 2019-2020 Scholarship Application

**The LJC Board of Trustees Executive Committee will review scholarship applications. We realize the sensitive nature of this information and therefore information will be kept confidential.**

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Date This Form Was Completed: \_\_\_\_\_

Place of Employment/Position: \_\_\_\_\_

Approximate Annual Household Income: \_\_\_\_\_

Number of persons in household: \_\_\_\_\_

1. Have you approached your employer for tuition assistance? \_\_\_\_ Yes \_\_\_\_ No

If yes, what amount is your employer covering? \_\_\_\_\_

2. Please explain your financial need in detail, especially if there are particular household circumstances that should be considered. (i.e. single parent, children, person with disability, etc.)

**Please use an additional sheet if necessary.**

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Scholarships may be available up to 60% of the total program cost.  
Full tuition scholarships are not available.

Scholarship Applicant's Signature: \_\_\_\_\_

Upon review, the LJC Executive Committee may interview the applicants.

**Scholarship Application Deadline: March 6, 2019**