

# LHSRA | LOUISIANA HIGH SCHOOL RALLY ASSOCIATION

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## Overall Winner Scholarship Verification Form

**DUE BY APRIL 1<sup>ST</sup> OF STUDENTS FIRST SPRING SEMESTER**

*To be completed by the STUDENT:*

Name: \_\_\_\_\_ SSN or Student ID #: \_\_\_\_\_

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

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

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

High School: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

I was the overall winner in the following State Rally literary event(s):

Rally Event/Year: \_\_\_\_\_

Rally Event/Year: \_\_\_\_\_

Rally Event/Year: \_\_\_\_\_

I have enrolled and registered to attend the following college or university in Louisiana:

University/College: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

I certify that all information contained on this form is true and correct to the best of my knowledge.

\_\_\_\_\_  
Student's Signature Date

*To be completed by the UNIVERSITY REGISTRAR:*

The aforementioned student is enrolled and registered as follows (*affix official university seal*):

University/College: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Credit Hours: \_\_\_\_\_ Full-Time Status: \_\_\_\_\_

I certify that all information contained on this form is true and correct to the best of my knowledge.

\_\_\_\_\_  
University Registrar's Signature Date

*For LHSRA Use Only:*

\_\_\_\_\_  
Executive Director's Signature Date