## Request for an Application 2026-27 Academic Year

The following form when completed and submitted to the Leopold Schepp Foundation serves as a formal request for a scholarship application. Upon receipt of this form, the Scholarship Committee will determine your eligibility for an application. Before completing this form, please make sure that you meet all of the guidelines for eligibility that are posted on the website and that you add the Schepp Foundation to your email "save senders" list.

1.

Provide the following information:

Name				
Mailing Addres	ss			
Email Address				
Telephone	Home			
	Cell			
What is your e	ducation to date? List hid	h schools colleges and/or liniver	sities attended/attending Incl	ude
starting dates,		es obtained or expected and final	rsities attended/attending. Incl or most recent GPA. Indicate	
starting dates,	graduation dates, degree	es obtained or expected and final		"NA"
starting dates, not applicable. High School Community	graduation dates, degree Attach additional pages	es obtained or expected and final s, if necessary.	or most recent GPA. Indicate	"NA"
starting dates, not applicable. High School	graduation dates, degree Attach additional pages	es obtained or expected and final s, if necessary.	or most recent GPA. Indicate	"NA"
starting dates, not applicable. High School Community	graduation dates, degree Attach additional pages  Name  Name	Dates Attended  Dates Attended	Date of Graduation  Degree Received or Expected	"NA"
starting dates, not applicable. High School Community College	graduation dates, degree Attach additional pages  Name  Name	es obtained or expected and final s, if necessary.  Dates Attended	Date of Graduation  Degree Received	"NA"
starting dates, not applicable. High School Community College	graduation dates, degree Attach additional pages  Name  Name  Name  Name	Dates Attended  Dates Attended  Dates Attended	Date of Graduation  Degree Received or Expected  Degree Received or Expected	"NA"
starting dates, not applicable. High School Community College	graduation dates, degree Attach additional pages  Name  Name	Dates Attended  Dates Attended	Date of Graduation  Degree Received or Expected  Degree Received	"NA"
starting dates, not applicable. High School Community College	graduation dates, degree Attach additional pages  Name  Name  Name  Name	Dates Attended  Dates Attended  Dates Attended	Date of Graduation  Degree Received or Expected  Degree Received or Expected  Degree Received or Expected	

College/University	Expected Date of Completion	Degree So
What is your vocational goal?		
Provide a statement of your financial need.		
What is your age?		
Are you a citizen or permanent resident of the Unite	ed States? If not, where	
What is your availability for an interview in New You Trustee of the Foundation is required of all applicar requesting a formal application, you must consider Foundation does not reimburse travel expenses.	nts between the months of September an	d February. Befo

Return this completed form to either:

<u>information@scheppfoundation.org</u> (PDF format, please)

(or a paper copy to)

The Leopold Schepp Foundation 950 Third Avenue, Suite 3100 New York, New York 10022-2833