

## LINCOLN MARX MEMORIAL SCHOLARSHIP APPLICATION 2025-26

### ELIGIBILITY

The applicant must be a graduating senior who attended Bert Lynn Middle School who plans to or currently attends a college, university, or accredited trade school and has a financial need. Previous TTA scholarship recipients are not eligible. Enrollment and use of scholarship funds must be completed within the academic year. TTA reserves the right to disqualify applicants whose attendance at Bert Lynn Middle School cannot be verified.

**APPLICATION DUE DATE - Monday, April 6, 2026, by 5:00 PM**

### INSTRUCTIONS

1. Please type or use ink. Answer each question and complete all blanks.
2. Use N/A (not applicable) for questions that do not apply.
3. Applications received after the deadline or deemed incomplete will not be considered.
4. Return the completed application to: Torrance Teachers Association,  
1619 Cravens Avenue  
Torrance, CA 90501

### APPLICANT IS RESPONSIBLE FOR THE FOLLOWING:

- **Applicant Information** - Page 2  
Use the cumulative GPA (weighted) for the high school grade point average.
- **School Activity Record** - Page 3
- **Community Activity Record** – Page 4
- **Applicant Statement** - Page 5
- **High School Senior - Submit Two Letters of Recommendation** - Pages 6 & 7
  1. **Certificated school employee (teacher, counselor, administrator, etc.)**
  2. **Community member who knows the applicant primarily outside of the school setting**
- **College Student - Submit One Letter of Recommendation** - Page 7  
A letter from a certificated school employee or community member
- **Current High School and/or College Transcripts**  
Transcripts from the last two years are considered current.
- **Complete Forms**

Applicant's Name: \_\_\_\_\_

# LINCOLN MARX MEMORIAL SCHOLARSHIP APPLICATION 2025-26

## APPLICANT INFORMATION

NAME: \_\_\_\_\_

MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_ AGE: \_\_\_\_\_ PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_  
Street City State Zip

LOCAL ADDRESS: \_\_\_\_\_  
Street City State Zip

EMAIL: \_\_\_\_\_

CURRENT STATUS - CHECK THE BOX THAT APPLIES:  High School  College

FILL IN THE FOLLOWING INFORMATION:

High School	Dates of Attendance	High School GPA (Weighted)	Intended College/University & Location

College Attending	Dates of Attendance	GPA	Number of Units Completed

DESCRIBE YOUR CAREER PLANS/COURSE OF STUDY: \_\_\_\_\_

\_\_\_\_\_

Parent's Names	Place of Employment	Job Title

Number of dependents in your home: (include yourself, but not your parents): \_\_\_\_\_

Ages of brothers and sisters: \_\_\_\_\_ Number in college: \_\_\_\_\_

**I HEREBY AFFIRM** that I intend to be enrolled in an accredited school of higher education and that I propose to use this scholarship for that purpose. I understand that no funds shall be released to me until I provide TTA with proof of enrollment from an accredited school of higher education. I understand that enrollment must be completed within the current calendar year.

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

Applicant's Name: \_\_\_\_\_

## LINCOLN MARX MEMORIAL SCHOLARSHIP APPLICATION 2025-26

### SCHOOL ACTIVITY RECORD

Please complete pages 3 and 4 with information regarding your participation in school and community activities. Type or print clearly or attach computer printout using this format. Attach an additional sheet if necessary.

Place an "X" under "Grade" column for year of participation. Specify any offices held.

School Organizations / Activities / Sports	9th	10th	11th	12th	College

Awards / Honors / Achievements	9th	10th	11th	12th	College

Applicant's Name: \_\_\_\_\_

## LINCOLN MARX MEMORIAL SCHOLARSHIP APPLICATION 2025-26

### COMMUNITY ACTIVITY RECORD

Place an "X" under "grade" column for year of participation. Specify offices held.

Community Organizations/Activities	9th	10th	11th	12th	College

Employment	9th	10th	11th	12th	College

Awards / Honors / Achievements	9th	10th	11th	12th	College

Personal Achievements	9th	10th	11th	12th	College





