

Lynn Topp Memorial Scholarship

This scholarship is a tribute to our daughter, Lynn, who was taken from us so suddenly, and in a way, that is hard to accept. Due to the generosity of the community, family, and friends, we are offering a scholarship in her memory.

Name: _____ Phone No: _____

First

Middle

Last

Area Code

Address: _____

No.

Street

City

State

Zip

Age: _____ Date of Birth: ____/____/____ Brothers: _____ Sisters: _____

Father's Name and Occupation: _____

Mother's Name and Occupation: _____

Name of college or technical school you plan on attending after graduation:

Address: _____

No.

Street

City

State

Zip

Have you been accepted for admission? Yes _____ No _____

School Functions: _____

Church Functions: _____

Community Functions: _____

Grade Point Average: _____

Are you presently employed: Yes _____ No _____

If yes, where? _____

Do you plan on working part time while in college? Yes _____ No _____

Please write a short paragraph describing your goals after college.

(Use reverse side or separate sheet of paper.)

****Scholarship is open to any graduating senior. A check will be given to the selected graduate upon proof of acceptance.**

Deadline to Receive Application: May 3, 2024

Mail completed applications to: Joe & Mary Lou Topp

13199 U.S. 127

Rossburg, OH 45362