Little Rock Central High School

Scholarship/Grants Verification Form

Class of 2023

Last Name _____ First Name _____Middle Name

Student ID# _____

Race: _____

Gender: _____

College/University and City and State you will be attending (please list below):

_____

Documentation of each accepted scholarship must be attached to this form or email; this form is the basis for announcing scholarships at graduation. Please email this form to veronica.medley@lrsd.org. Also attach documentation for each scholarship/grant listed below.

Name of Scholarship/Grant/Military	Value	Length (i.e., 1 year, 4 years)	Total Amount Awarded