



Mayor Lizette P. Parker Memorial Foundation Scholarship Application

Applicant Information

Full Name:

Date of Birth:

Address:

City:

State:

Zip:

Phone Number:

Email Address:

Parent/Guardian Names:

City: _____ State: _____

Academic Information

Current High School:

City: _____

Current GPA (Minimum 2.5 on a 4.0 scale):



Mayor Lizette P. Parker Memorial Foundation Scholarship Application

Intended Major / Field of Study:

Colleges/Universities You Are Applying To:

1. _____

2. _____

3. _____

Community & Civic Engagement

Community service activities:

Leadership roles or civic organizations:

Required Documents (attach separately)

- Official High School Transcript
- Two Letters of Recommendation
- 500-Word Typewritten Essay (no AI)

Certification

Applicant Signature:

Date:

Essay Question:

Describe a meaningful experience or person that has had a profound impact on your life. How had this impacted your personal accomplishments and experiences, and allowed you to grow into the person you are today?