



# ANNUAL SCHOLARSHIP

*In Memory of Lynn Topp  
And All Lost Loved Ones*

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, FRIENDS AND THE ANGEL RUN 5K PROCEEDS; WE ARE OFFERING A SCHOLARSHIP IN HER MEMORY.

NAME: \_\_\_\_\_ PHONE No.: \_\_\_\_\_  
FIRST MIDDLE LAST

ADDRESS: \_\_\_\_\_  
NO. STREET CITY STATE ZIP

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ BROTHERS: \_\_\_\_\_ SISTERS: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

NAME OF COLLEGE OR TECHNICAL SCHOOL YOU PLAN ON ATTENDING AFTER GRADUATION:  
\_\_\_\_\_

HAVE YOU BEEN ACCEPTED FOR ADMISSION? Yes \_\_\_\_\_ No \_\_\_\_\_

SCHOOL FUNCTIONS: \_\_\_\_\_  
\_\_\_\_\_

CHURCH FUNCTIONS: \_\_\_\_\_  
\_\_\_\_\_

COMMUNITY FUNCTIONS: \_\_\_\_\_  
\_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_ GRADE POINT AVERAGE: \_\_\_\_\_ (ATTACH TRANSCRIPT)

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: FIRST SATURDAY IN JUNE

SEND TO: JOE & MARY LOU TOPP  
13199 U.S. 127  
ROSSBURG, OH 45362