

**LOS ANGELES PRINTMAKING SOCIETY FOUNDATION
STUDENT SCHOLARSHIP GRANT APPLICATION**

TODAY'S DATE _____

YOUR NAME _____

ADDRESS _____

PHONE (DAY) _____ (EVE) _____ EMAIL _____

SCHOOL (CURRENT) _____

EDUCATION (GENERAL and ART RELATED) _____

WORK EXPERIENCE (GENERAL and ART RELATED) _____

Please state how an **LAPS Foundation Scholarship Grant Award** will be of help to you in pursuing your educational and career goals and plans for the future:

Please submit this application **within** your portfolio of **6 original prints** completed within the last two years. The portfolio must contain at least two different editionable prints.

SIGNATURE OF STUDENT _____ DATE _____

SIGNATURE OF FACULTY SPONSOR _____ DATE _____

You will be notified well in advance about the *location* and *time* for delivery of your portfolio, including this application, which *must be signed by a faculty sponsor*. Applications are to be placed inside the portfolio.

For any questions or concerns, please contact:

Diane McLeod, President, LAPS Foundation
dmcleodprints@gmail.com 562-331-8100 (text ok)