



Clan Little Society North America



Scholarship Request Form

Date: _____

Student Name: _____

Address: _____ City: _____

State: _____ Zip: _____

School of Attendance: _____

Address: _____ City: _____

State: _____ Zip: _____

School Dean / Enrollment: _____

Class attended: _____

Phone number: _____

Signature: _____

This form is for scholarship purposes only. One application per student per year will be accepted. Only one student will be awarded the Scholarship fund on an annual basis. The student is a member or a family member of an active member of the Clan Little Society NA. The Clan Little Society NA will reimburse the applicant upon completion of the approved class up to \$250.00. This application is subject to approval and verification by the Board of Directors.

Approval Date: _____

Date of Reimbursement: _____ Check number: _____

Approved classes:

- Genealogy
- Bag Pipes
- Scottish Dance
- Scottish Music
- Celtic Language

We encourage every student who is interested in learning more about their heritage to complete this form and mail to:

Thomas Little, Steuart
Clan Little Society NA
600 E. Admiral Blvd
Suite 1801
Kansas City, MO 64106

Thank you,

Thomas Little, Steuart
Clan Little Society North America