



# THE LAKELAND CHILDREN'S CENTER

## About the Award

The Lakeland Children's Center, a licensed not for profit organization. Our mission is to provide an enriching environment which will promote positive experience through socialization and assist in the growth and development of each child. Lakeland Children's Center (LCC) focuses on creating a safe and nurturing atmosphere where each child is encouraged to pursue his/her own interests, develop friendships and interpersonal skills and grow in confidence. We are dedicated to meeting the needs of both children and parents for quality before and after school care.

## Application Information

Eligibility Criteria: Awarded to students who have attended the Lakeland Children's Center. In addition, the student must have an academic average of 85 or above.

Amount: One award of \$1,000 will be presented annually to qualified applicants.

## Application Information, Requirements and Deadline:

1. Completed application and supporting documentation
2. A 500 word essay on how the Lakeland Children's Center and/or its staff has made an impact on you and how has the program shaped you as an individual.
3. A high school transcript.

## Contact Information:

Beth O'Hara  
Executive Director  
P.O. Box 712  
Shrub Oak, NY 10588  
914-528-8119  
E-mail: [bohara@lakelandchildrens.com](mailto:bohara@lakelandchildrens.com)  
Web Site: [www.lakelandchildrenscenter.com](http://www.lakelandchildrenscenter.com)



## Lakeland Children's Center High School Scholarship

**DEADLINE: March 31, 2024**

Nominations received after the deadline will not be considered eligible.

Please type or print.

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Email \_\_\_\_\_

Years that you attended the Lakeland Children's Center (Please give dates) \_\_\_\_\_

Please share your academic and professional goals: \_\_\_\_\_

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Please share any academic honors, awards and school involved activities  
(Include sports): \_\_\_\_\_

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Please share your outside interests, service activities and employment:

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I have read and understand all information on this application and affirm that all information submitted is true and accurate to the best of my knowledge and correct as of the date of this application. The essay is my own original work. In consideration of the possible receipt of financial assistance from Lakeland Children's Center, I grant Lakeland Children's Center all rights in publication or use of material submitted as part of the application, and forever release any claim to ownership of said materials.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Checklist:**

- |                          |                       |                          |                |
|--------------------------|-----------------------|--------------------------|----------------|
| <input type="checkbox"/> | Completed application | <input type="checkbox"/> | 500 word essay |
| <input type="checkbox"/> | Transcript            |                          |                |

Send the completed application with ALL supporting documentation in an envelope marked HS Scholarship to:

Beth O'Hara  
Executive Director  
Lakeland Children's Center  
P.O. Box 712  
Shrub Oak, NY 10588

**The deadline to receive the application is March 31, 2024.**