



Family Annual Gross Income, before tax deductions. Check one:

- \$75,000 or below
- \$75,001 - \$125,000
- \$125,001 - \$175,000
- \$175,001 or \$225,000
- \$225,001 and above

HIGH SCHOOL EDUCATION:

Current SVUSD High School Attending *

School Name City

Previous High School(s) Name and Location Attended

Additional schools may be provided on a separate piece of paper, typed and with your name at the top.

School Name City

School Name City

School Name City

EXTRA - CURRICULAR ACTIVITIES:

School/Community Activities

Additional activities may be provided on a separate piece of paper, typed and with your name at the top.

Community or School Activity	Club or Volunteer	Grade (9-12)	Hours per month	# months active	Leadership position Held
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List Honors:

Additional honors may be provided on a separate piece of paper, typed and with your name at the top.

Grade Name of Honor



ESSAY INSTRUCTIONS: Please type your essay on a separate piece of paper with your name at the top. Essay must be emailed to Scholarship@alsvca.org on or before the application due date.

CERTIFICATIONS/ PERMISSIONS: *

MARKETING PERMISSION: I will be 18 as of June 1, 2026, and I give Assistance League of Saddleback Valley permission to publish in print, electronic, or other visual likeness of me for the purpose of publicizing this scholarship. I waive any rights of compensation or copyright ownership thereof.

- Yes
- No

If you will not be 18 years of age by June 1, 2026, a parent/guardian must provide consent for Assistance League of Saddleback Valley to use your name and likeness for publicity.

Print Name

Signature

CERTIFICATION: By submitting this application and signing below, I certify that the information included in this application is true and correct to the best of my knowledge. I authorize the release of information to confirm and/or verify the contents for scholarship purposes only.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

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DOCUMENT CHECKLIST

All must be emailed to Scholarship@alsvca.org on or before the due date.

- Completed and signed High School Scholarship Form
- 300-500 Word Essay. Make sure your name is at the top
- One signed letter of recommendation from a counselor, high school teacher, or another adult non-family member
- Official and signed High School Transcript
- Additional documents may be provided for "Previous High Schools Attended", "Extra-curricular activities", and "Plans/goals", on a separate sheet of paper, typed and with your name on the top.

The Scholarship Committee will notify you by email that your application has been received. Students will be notified of their scholarship award on or before graduation Awards Night. Scholarship payment will be made only AFTER the student emails official verification of their 2026 enrollment at a four-year or community college or approved trade school to Scholarship@alsvca.org.