



Cleveland, Ohio

Honorary and Memorial Scholarship Donation Form

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Thank you for donating an honorary or memorial scholarship in honor/memory of your loved one. Please provide us with some information:

Name of Scholarship: _____

Duration (circle): One-time or Ongoing

Amount: _____

Donated by: _____

Contact information: Address, email and phone

Criteria (circle): High school senior, Current College Student, or No Preference

Any special requirements (gender, area of study, financial need, no preference)?

Please provide a brief biography and an electronic photo of your loved one for the scholarship program.

Return information to:

Mrs. Karen (Haddad) Ziton
Second Vice President, Scholarship Chairwoman
10,000 Ridge Line Drive
North Royalton, Ohio 44133
(440) 390.0441

LSAJLScholarship@gmail.com