

**Leadership Marshall County  
Marshall County Community Foundation  
P.O. Box 716  
Plymouth, IN 46563**

**Scholarship Application**

**Name:** \_\_\_\_\_

**1. Please write a brief paragraph as to why you need scholarship assistance:**

**2. If you receive partial assistance, how much are you able to pay towards your tuition? \_\_\_\_\_**

**3. Please List:  
Telephone number: \_\_\_\_\_  
Best time to contact you: \_\_\_\_\_**