

# 2026 KLorraine Cosmetology Scholarship Application

**Full Legal Name:**

**High School:**

**School Counselor Name and Email:**

**Cosmetology School Plan (include name of school and dates):**

## **Honors/ Achievements**

*List below any honors, awards, letters or special recognition you have received.*

## **Employment**

*List below any jobs you have had during high school. List the job name, location, dates, what you did and contact name & phone number.*

## **Volunteerism**

*List below any volunteer experiences you have had during high school. List the volunteer experience, location, amount of hours and what you did.*

*Application form submission is from March 2, 2026 to April 3, 2026 at 11:59pm.*

*Email forms to [klorrainescholarship@gmail.com](mailto:klorrainescholarship@gmail.com) with subject line 2026 Scholarship Application- [first and last name].*

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### **Goals**

*What is driving you to pursue a career in cosmetology and where do you see yourself professionally in 5 years?*

### **Job Shadow**

*Have you completed a job shadow in cosmetology?* YES  NO

If so, include the location, date(s) and contact name & phone.

What did you take away from the job shadow experience?

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