



# LAOTIAN AMERICAN SOCIETY

**Pride in our Heritage  
Passion for our Future**

P.O. Box 48432, Atlanta, GA 30362

[www.lasga.org](http://www.lasga.org)

## 2010 STUDENT AWARD NOMINATIONS

**Deadline: July 24, 2010**

The Laotian American Society ([www.LASGA.org](http://www.LASGA.org)) would like to recognize the achievements of **elementary school, middle school and high school students**. The nomination categories and documents needed are:

**1. NOMINATION CATEGORIES: Please check all that apply.**

Straight A's    GPA 3.0+    Perfect Attendance    Athletic Recognition  
 Community Service    Extracurricular Activities

I would like to nominate myself/this student (name): \_\_\_\_\_

Reason (ex: A in Math): \_\_\_\_\_

Please indicate all subjects to be nominated (ex: A in Science): \_\_\_\_\_

**2. DOCUMENTS NEEDED:**

- copy of student's report card for the year
- copy of awards received
- copy of other documents as needed depending on nomination (please contact Fawn Nguyen)

Please send all appropriate documents by **July 24, 2010** to **P.O. Box 48432, Atlanta, GA 30362**

**Fax: (Attention: Fawn Nguyen) Email: [Education@LASga.org](mailto:Education@LASga.org). Questions? Call 678.787.3612**

**NOTE:** We will send you a confirmation once we receive your nomination sheet. If you do not hear from us two weeks after you submit your nomination, please call Kim ( Ting ) Pathammavong at 678.787.3612

**3. STUDENT INFORMATION**

Student's Name \_\_\_\_\_ Age: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's name \_\_\_\_\_

Best time to contact you or your parents? \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

ZIP \_\_\_\_\_ Home ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

**4. SCHOOL:**

School Name \_\_\_\_\_ Grade \_\_\_\_\_

City \_\_\_\_\_ County: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_

5. What would you like to be when you grow up and why? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Do you do intend to go to college, why or why not? \_\_\_\_\_

\_\_\_\_\_

7. Who do you know that has gone to college and what did they study to be? \_\_\_\_\_

\_\_\_\_\_

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_

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

**8. SUBMITTER:**

Name of submitter (if other than self) \_\_\_\_\_

When is the best time to contact you? \_\_\_\_\_ Phone (     ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Self /Submitter's Name \_\_\_\_\_ Signature \_\_\_\_\_

**Permission To Use Pictures**

I give permission to LAS to use photographs or video footage of my participation in LAS Scholarship activities and related functions in educational and promotional materials benefiting various LAS Programs.

Self or parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**Office Use Only:**

Application Number \_\_\_\_\_ Date Received \_\_\_\_\_ Decision Date \_\_\_\_\_

Approve \_\_\_\_ Reject \_\_\_\_ Reasons (if any) \_\_\_\_\_