

COMMUNITY - BASED SCHOLARSHIPS APPLICATION

You may write on this page only – all other attachments must be typed.
BLACK INK only, do not write on back, attach additional sheets with paper clips DO NOT STAPLE

Name of Applicant: _____ **GPA:** _____
Use your full name with middle initial *Cumulative*

Home Address: _____
Complete home address

College/university/tech you plan on attending this fall: _____

Have you been accepted at the college/university/technical school you plan on attending? ___yes ___no

Will you be attending on a full-time basis (12 credits or more)? ___yes ___no

What is the current major you will be pursuing? _____

Check EACH Community Based Scholarship you are applying for.
You will only be considered for the scholarships you have marked.
Only one Community-Based Scholarship application needs to be completed
to apply for any of the scholarships listed below.

- | | | |
|--|--|---|
| <input type="checkbox"/> American Legion Auxiliary (F) (*) | <input type="checkbox"/> Louis & Mary Zebro (F) | <input type="checkbox"/> Stanley & Mary Sondelski |
| <input type="checkbox"/> Ann Truax Dehlinger (F) | <input type="checkbox"/> Masonic Lodge | <input type="checkbox"/> Stanley Zebro |
| <input type="checkbox"/> Creske-Grassl Memorial (F) | <input type="checkbox"/> Mosinee Education Assoc | |
| <input type="checkbox"/> Dan Hoffman Memorial | <input type="checkbox"/> Mosinee Elementary School | |
| <input type="checkbox"/> DeBroux Family Scholarship | <input type="checkbox"/> Mosinee KK Ridger Snowmobile(*) | |
| <input type="checkbox"/> Helen & Oscar Rockman(F) | <input type="checkbox"/> River Valley | |
| <input type="checkbox"/> John & Fritz Howland | <input type="checkbox"/> River Valley Harmonizers | |
| <input type="checkbox"/> Jimmy Edwards Memorial Hockey | <input type="checkbox"/> South Area Business (F) | |

(F) Complete and attach **ONLY ONE** Financial Need form if you are applying for any of these scholarships.

(*) Additional information required-see below

AMERICAN LEGION AUXILIARY SCHOLARSHIP

Son or daughter whose father, mother or grandparent was or is a member of the Armed Forces? Yes _____ No _____

If yes, give name of parent, branch of Military and discharge date:

Parent Name: _____ Branch of Military: _____ Discharge Date: _____

MOSINEE KK RIDER SNOWMOBILE CLUB

Copy of Current snowmobile registration card

On a separate sheet of paper type brief responses to the following questions.

Paper clip this completed cover sheet to your responses and return it to Student Services by the due date.

Note: Your name *must* appear on the top of each attachment.

1. Briefly describe the major you plan on pursuing and your long term goals.
2. List school and community activities in which you have participated in, awards won and offices held.
3. Have you had any part-time or summer jobs? List employer(s) and job duties during your employment.