WESTERN NEBRASKA ADMINISTRATORS’ (WNA)

EDUCATION SCHOLARSHIP

Established in 2011 by fifty western NE schools.

Scholarship awarded without regard to race, color, national origin creed, or age.

DESCRIPTION-

Amount: Five hundred dollars

Maximum number of scholarships awarded annually: Four

Scholarship will be paid at the beginning of the second semester to the institution student attended first semester.

Scholarship may be applied toward: Tuition, books, and room/board

Application deadline: March 15, 2017

WNA Scholarship Committee will select recipients.

REQUIREMENTS FOR ELIGIBILITY-

Students must graduate from a high school whose administrator is a paid member of WNA.

Applicants must indicate interest in a career in the educational field.

Applicants must complete the application form.

Applicants must submit two letters of recommendation stating why they should receive the scholarship:

* One from a teacher in the high school from which they will graduate
* One from a community member in the district where they attend high school

Applicants will attach a one-paragraph self-narrative to the application stating why he/she should receive this scholarship.

The application and supporting documents should be turned into the guidance counselor of the high school the applicant attends. Counselors will submit to:

WNA Scholarship Committee

Attention: Paula Sissel

Garden County Schools

PO Box 230

Oshkosh, NE 69154

*In order for funds to be disbursed, the recipients of the scholarship will need to request that their school district notify the treasurer of WNA that the student’s enrollment for the second semester has been verified along with information about the institution of attendance.*

WESTERN NEBRASKA ADMINISTRATORS SCHOLARSHIP APPLICATION FORM

MUST BE POSTMARKED ON OR BEFORE March 15, 2017

Please Print or Type Your Responses

ADMINISTRATIVE INFORMATION:

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First Middle Initial

PARENT OR GUARDIAN NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Number P.O. Box

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF HIGH SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town State Zip

GPA: \_\_\_\_\_\_\_\_\_

DATE OF GRADUATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF ADMINISTRATOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF POST-SECONDARY INSTITUTION YOU PLAN TO ATTEND:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF POST-SECONDARY INSTITUTION:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE OF POST-SECONDARY INSTITUION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

INDICATE INTENDED PROGRAM OF STUDY IN EDUCATION FIELD:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SUPPORTING INFORMATION: Please provide the following information; if additional space is needed please attach a separate sheet.

PARTICIPATION AND ACHIEVEMENTS IN EXTRACURRICULAR SCHOOL ACTIVITIES:

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POSITIONS HELD IN GAINFUL EMPLOYMENT AND PERIODS OF EMPLOYMENT:

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VOLUNTEER WORK PERFORMED AND WHERE IT WAS PERFORMED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_