

\$Amount

Year 2015

First Name Last

**WAUKESHA COUNTY 4-H LEADERS' ASSOCIATION
SCHOLARSHIP AWARDS
APPLICATION FORM TO RECEIVE MONEY**

Award Recipient: «FirstName» «LastName»	Award Amount: \$ «Amount»
Award Date: December 31, 2015	Expires: December 31, 2017

Application Date: _____
Address (Where to send award check): _____
City, State, ZIP: _____

Academic Status - Completed First Term Information

Name of School: _____
School Address: _____
Title of Higher Education Major: _____
Credits Completed: _____
Cumulative Grade Point Average: _____

Academic Status - Re-Enrollment Information

Name of School: _____
School Address: _____
Title of Higher Education Major: _____
Start Date of Semester or Quarter: _____
Credits Attempted: _____

Additional Information – Optional -Not Required
(This information will help with future planning of scholarship amounts)

Annual Cost of Tuition: \$ _____
Annual Cost of Books: \$ _____
Annual Cost of Housing: \$ _____
Any comment you may feel important: _____

Submittal Instructions - After completing the above required and optional information:

Attach a school transcript as proof of completion of first full term and re-enrollment information (a tuition bill, an official school enrollment confirmation, etc.) to back of this form.
Staple to back in top left corner.

Send form with attachments to: Mary Hiemke, Awards Scholarship Chairperson
Waukesha County 4-H Leaders Association
N87W35753 Mapleton Road
Oconomowoc, WI 53066 (920) 474-4589
hiemkem@execpc.com