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Youth Leadership Kearney Graduate Scholarship APPLICATION FORM

Up to three scholarships for \$1,200 will be awarded to Youth Leadership Kearney graduates, pursuing a post-secondary education at an accredited two-year or four-year institution. Preference will be given to applicants choosing to attend an institution in Nebraska.

Students must carry a minimum 3.0 GPA and must be a graduating high school senior. Scholarship monies will be paid directly to recipient's collegiate institution first semester after verification of current enrollment. See application for address. This scholarship is a one-time award.

Please type and limit responses to these pages unless attachments are necessary.

DEADLINE: March 15

NAME _____ DATE _____

CURRENT ADDRESS _____

CITY/STATE/ZIP _____

HOME TELEPHONE (____) ____ - ____ EMAIL _____

PARENTS'/GUARDIANS' NAMES & ADDRESSES (IF DEPENDENT) _____

HIGH SCHOOL _____ HIGH SCHOOL GPA _____

POST-SECONDARY SCHOOL YOU ARE PLANNING TO ATTEND:

DO YOU HAVE A FINANCIAL NEED FOR THIS SCHOLARSHIP? YES / NO

Explain in your own words your need for scholarship and your overall plan for financing your college education. _____

CAREER GOALS (INCLUDING THE PLANNED PROGRAM OF STUDY): _____

PAST OR PRESENT EMPLOYMENT:

CODE

EMPLOYER(S)	DATES OF EMPLOYMENT	# OF HOURS/WEEK

ESSAY REQUIREMENT:

Submit with this application form an essay of approximately 1 page in length, double spaced in response to the following questions:

1. Describe the personal benefits to you from your leadership, service and involvement in school and/or community.
2. Describe the benefits to your school and/or community from your leadership, service and involvement.
3. What do you think are the most important things you have gained by participating in the Leadership Kearney program?

ATTACHMENTS REQUIRED:

- 1) TYPED ESSAY RESPONSE
- 2) RESUME INCLUDING ACTIVITIES AND HONORS, VOLUNTEER AND COMMUNITY PROJECTS FROM GRADES 9-12.
- 3) A SELF-ADDRESSED STAMPED ENVELOPE TO ASSIST US IN RESPONDING TO YOU.

I authorize representatives of my high school, college, university, vocational or technical school where I attend, and others to provide the Scholarship Selection Committee with any of my personal records or transactions for the purpose of evaluating this scholarship request.

Applicant Signature

Date**DELIVER OR SEND THIS APPLICATION AND ATTACHMENTS TO:**

Leadership Kearney
ATTN: SCHOLARSHIP COMMITTEE
P.O. Box 692
Kearney, NE 68848

DEADLINE: March 15

YOU WILL BE NOTIFIED OF THE RESULTS OF YOUR APPLICATION