

NEW HORIZONS SUPPLY COOPERATIVE
SCHOLARSHIP APPLICATION

Name _____ Date of Birth _____

Address _____ Phone _____

Name of Parent(s) or Guardian _____

High School _____ Date of Graduation _____

Grade Point Average _____ Rank in Class _____ of _____

College or Tech School Attending _____

Anticipated Field of Study _____

Why? _____

School Activities:

Music _____

Drama/Forensics _____

Leadership _____

Athletics _____

Clubs _____

Other _____

Community Activities:

Clubs _____

Athletics _____

Other _____

List Recognition You Received for School or Community Activities:

Work Experience _____

List Any Other Scholarships You Have Been Awarded: _____

PLEASE ATTACH A STATEMENT OF 200 WORDS OR MORE TELLING WHY YOU ARE APPLYING FOR THE SCHOLARSHIP AND WHY YOU WOULD BE A WORTHY RECIPIENT. The statement may be typed or handwritten and must be signed by the applicant. ALSO, PLEASE ATTACH TWO COMPLETED SCHOLARSHIP APPLICATION REFERENCE FORMS.

Signature _____ Date _____

SCHOLARSHIP APPLICATION REFERENCE

Please give your opinion of _____, who has applied for a NEW HORIZONS SUPPLY COOPERATIVE scholarship. Give any information which you feel will aid the selection committee in evaluating the applicant's request. Applications are judged on leadership, scholastic achievement, extra curricular activities, motivation, and goals.

Signed _____

Title/How Acquainted _____

Address _____

Please send this form to:

Federated Youth Foundation
Attn: David Erickson
131 W. Wilson St. Suite 400
Madison, WI 53703