



Wabash Independent Networks, Inc.  
2017 Scholarship Application

Name of Applicant: \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name of High School attending: \_\_\_\_\_

College of Choice: \_\_\_\_\_ Major: \_\_\_\_\_

Names of parents: (Father) \_\_\_\_\_

(Mother) \_\_\_\_\_

\_\_\_\_\_  
*Signature – Student*

\_\_\_\_\_  
*Date*

Please submit this application to: Attention: General Manager  
Wabash Telephone Cooperative, Inc.  
P.O. Box 299  
Louisville, IL 62858

**APPLICATION IS DUE BY Wednesday, MARCH 1, 2017**

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Name of Applicant: \_\_\_\_\_

Date application received: \_\_\_\_\_

\*Extra-Curricular Activities: (Organizations, athletics, music, etc.) Show years of involvement and offices held:

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\*Honors/Awards:

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\*Community and /or Other Activities:

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\*Work Activities: Employed? \_\_\_yes \_\_\_no. If yes, list your employer, job title, and approximate hours you worked per week.

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**Attachments to be Included:**

1. Copy of high school transcript to date.
2. Statement of 100 words or less to include Course of Study for college proposed occupation or profession, future goals, and other information pertinent to the award which has not been previously mentioned on this form.
3. Essay on "How has WIN services enhanced your life" consisting of no more than two (2) pages: 8 ½ x 11, double-spaced.