



Wabash Telephone Cooperative, 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:

*Honors/Awards:

*Community and /or Other Activities:

*Work Activities: Employed? ___yes ___no. If yes, list your employer, job title, and approximate hours you worked per week.

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. **"What are the benefits of being a Cooperative Member"** essay must not exceed 1 page (8 ½ x 11) and be typed and double-spaced.