



# John D. Andrews Memorial Scholarship

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

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

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

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

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

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

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

Rank in class: \_\_\_\_\_ Number in Class: \_\_\_\_\_

SAT or ACT Conversion Score: \_\_\_\_\_ Cumulative GPA after 7 semesters: \_\_\_\_\_

Parent or legal guardian's approximate annual household income:

\$0 - \$30,000

\$30,000 - \$60,000

\$60,000 and above

Have you been awarded a scholarship to date? If so, please list below:

\_\_\_\_\_

\_\_\_\_\_  
*Signature – Student*

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

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

**APPLICATION IS DUE BY MARCH 1, 2018**

\*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. Written statement to include:

- Why you wish to pursue a career in technology.
- Your educational plan including the degree/certificate you are seeking.
- Why you feel you would be a qualified recipient/need this scholarship.
- And, any other information you feel might assist in the screening process.

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