Wisconsin Rapids Kiwanis Club Kiwanis International

PO Box 757 WISCONSIN RAPIDS, WISCONSIN 54494 WISCONSIN RAPIDS KIWANIS CLUB MEMORIAL SCHOLARSHIP

The Wisconsin Rapids Kiwanis Club will award \$2000 to a full-time student who is a resident of the Tri-City Area which includes the Wisconsin Rapids, Port Edwards, Nekoosa, and Assumption High Schools, and who fulfills the following requirements:

Eligibility

- Must be a graduating senior enrolling as a full time student in a post secondary education program
- Have a minimum of 300 volunteer hours in your high school career
- Have an overall high school grade point average of 3.0 or higher (transcript required)
- Students applying must be either from Lincoln, Port Edwards, Nekoosa or Assumption High Schools

Application Procedures

- Complete (type) the Memorial Scholarship Application form for the Wisconsin Rapids Kiwanis Club
- Compose a brief essay of approximately 250 words or less (typed) on how your involvement in school and community activities has assisted you in furthering your education
- Return all materials to your Student Services department by March 29th, 2018
- Guidance departments must post mark all applications by April 5th, 2018
- Guidance departments at each school will submit all applications to the Kiwanis Club where; Kiwanis Scholarship Committee will review and make the final selection
- Include a photograph of yourself
- 2 letters of recommendation from someone you have worked with in a volunteer capacity

Selection Procedure

Representatives of the Wisconsin Rapids Kiwanis Club will make the selection of the recipient. The recipient of this scholarship must attend a Kiwanis meeting to describe how the scholarship may help them obtain their goals.

Wisconsin Rapids Kiwanis Club Memorial Scholarship Application

Personal	Information				Date:	
Name:				Date of Birth: Middle		th:
				11114410		
Address:	Street	С	ity		State	Zip
Phone: _	High Schoo			ol Attending:		
	nteer hours co st what you did	mpleted in F	ligh Scho		verage: (Verificatio -	n required)
Proposed	sed University: Degree/Program:					
List your i roles. Ple	tions/School and an analysis of the transfer o	school and	communi ient. You	ty activities, I may use th	organizations, e backside of	and leadership this application
School A	ctivities/Orgai	nizations	(Community	Activities/Org	ganizations
				100 700 700		
 Signature	of Applicant		 	Date		