

BERNADETTE REIDER SCHOLARSHIP APPLICATION

PURPOSE: The primary purpose of the Fund is to provide financial assistance to graduating seniors of a high school in Marquette County who will be pursuing certification, or a degree at an institution of higher education in the field of nursing.

SELECTION OF SCHOLARSHIP RECIPIENTS: Scholarship grant recipients shall be selected by a committee to be identified by Foundation, which may be an existing committee at Marquette Senior High School charged with selecting recipients of other scholarships. The selection criteria shall include: (a) Graduation from a Marquette County Senior High School; (b) Financial need; (c) Pursuing a career in nursing; (d) 3.0 GPA or greater; (e) Involvement in extracurricular activities in the community, church, and/or school; (f) Preference shall be given to participants in the ROTC Program. In order for the scholarship to be paid, the recipient shall be a full time student with at least 12 credits.

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PLEASE NOTE THAT THE DEADLINE FOR RECEIPT OF THE SCHOLARSHIP APPLICATION IS April 5th, 2016.

NAME: _____
 Last First Middle

CURRENT ADDRESS: _____

Telephone No. _____

FATHER'S NAME: _____
 Last First Middle

MOTHER'S NAME: _____
 Last First Middle

NAME OF COLLEGE OR UNIVERSITY WHICH YOU PLAN ON ATTENDING: _____

LOCATTION: _____

Have you been accepted by the school or college? YES _____ NO _____

What program do you plan to pursue? _____

I hereby authorize release of information from my school records, including test scores, to the Bernadette Reider Scholarship Committee.

Student Signature: _____

Patent's Signature: _____

If student is under 18

Date: _____

DO NOT WRITE BELOW THIS LINE

Rank in class ____ / ____ G.P.A. _____

High School Course of Study _____

School Acceptance Verified YES _____ NO _____ PENDING _____

