



Wabash Independent Networks, Inc.
2019 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, MARCH 1, 2019

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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. Essay on "How has WIN services enhanced your life" consisting of no more than two (2) pages: 8 ½ x 11, double-spaced.