



La Societe Des  
40 Hommes et 8 Chevaux  
Juneau County Voiture 1323



### Nursing Scholarship Application

1. Name of applicant \_\_\_\_\_
2. Home address \_\_\_\_\_
3. Name of school you will attend \_\_\_\_\_
4. Have you receiver official notice of acceptance? \_\_\_\_\_
5. What course or program will you study? \_\_\_\_\_

#### Family Information:

Parent information: (circle correct parental status)

1. Name \_\_\_\_\_ Father Stepfather Legal Guardian  
Occupation \_\_\_\_\_  
Employer \_\_\_\_\_
2. Name \_\_\_\_\_ Mother Stepmother Legal Guardian  
Occupation \_\_\_\_\_  
Employer \_\_\_\_\_
3. Number of brothers and sisters \_\_\_\_\_ Younger \_\_\_\_\_
4. Number of siblings currently attending college \_\_\_\_\_



**Community Involvement:**

What community, volunteer, church, or other out-of-school activities have you participated in?

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What employment experience have you had during your high school years?

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**Financial information:**

1. Do you plan to work during the college school year? \_\_\_\_\_

2. Will you submit a Free Application for Federal Student Aid? \_\_\_\_\_

If no, why? \_\_\_\_\_

3. Explain how you plan to finance your education. \_\_\_\_\_

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**Other:**

Do you have a family member, past or present, that has served in a branch of the USA military. This can be a parent, grandparent, sibling, aunt, or uncle. \_\_\_\_\_ If yes, what is their relationship to you? \_\_\_\_\_

**Essay:**

In your essay, respond to the following questions: What are your educational and career objectives and what influenced those goals? Why is receiving a scholarship important to you? The essay should be 800 to 1,000 words. Your essay will be judged on the following criteria: neatness, construction, sincerity, originality, and depth of thought. Please type this section on another sheet of paper and attach to the application form.

**Please include a school issued copy of your transcript to include your ACT and or SAT scores.**

**CERTIFICATION, ALL APPLICANTS**

I certify that all the information provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this applicant if requested. I give permission to the selection committee to review information on this form, my transcripts, test scores, and additional supporting documentation as part of this application.

Applicants signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent / Guardian: \_\_\_\_\_

Completed applications are to be sent to: Bill Bomber, Treasurer  
Voiture # 1323  
N5839 Woodland Hills Road  
New Lisbon, WI 53950