

MIDLAND SERVICES SCHOLARSHIP APPLICATION FORM

Instructions:

1. Complete all parts of the scholarship application form. Mail the completed application form to:

Midland Services Scholarship PO Box 500 Ashland, WI 54806

- 2. Give the "Reference Sheets" to three people: Instructors, Youth Agents, Employers, Coaches, or Community Leaders (at least one sheet should be completed by someone not in the educational field). Reference sheets should be mailed to Midland Services at the above address.
- 3. On a separate sheet of paper, include a one-page summary of some of the significant events in your life and describe your educational goals.
- 4. Scholarship Forms, One-page Summary, and Reference Sheets must be at Midland Services by March 31st.
- 5. All members of the Midland Services Cooperative and their children are eligible to receive a \$500.00 Scholarship, including employees and directors.
- 6. Winners will be notified by May 15th. Scholarships will be awarded after the completion of two semesters in an accredited college, university, or technical school. All applicants must currently be a student in good standing.
- 7. Applicants will be judged on leadership, scholastic achievement, extracurricular activities, motivation, and academic and live goals.
- 8. If you are awarded a scholarship, you will be asked to furnish a non-returnable photograph of yourself for publication.



SCHOLARSHIP APPLICATION

Name:	Date of Birth:
Home Mailing Address:	
Name of Parents/Guardian:	
County of Residence:	
Name of High School:	
Rank in Class:	(i.e. 10/20)
College or Tech School Attending:	
Indicate your Major or General Field of Stud	dy:
youth, community, or church organizations)	



Indicate your school activities that might be classed under the following headings:

Musical: Artistic: ____ Leadership: _____ How did you spend your summer vacation? Have you received, or do you intend to apply for other scholarships? If yes, which scholarship(s) have you received or are you applying for? Home Phone Number: ______ Date: _____ Midland Account Number:



Midland Services Cooperative Scholarship Application Reference

Please give your opini	on of		, who has applied for a
Midland Services Scho	olarship. Supply any information	on which you feel will aid th	e committee in
evaluation of the appli	cant's general merit. Also, con	nment on the character, coop	peration, attitude,
leadership, and/or need	d.		
Signed:		Position:	
Please send form to:	Midland Services		
	Scholarship Fund PO Box 500		

Ashland, WI 54806



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