



Green Lake County Home and Community Education
JEAN HOLLANDER MEMORIAL SCHOLARSHIP APPLICATION FORM

- A. The scholarship award will be paid by the Treasurer of the Green Lake County HCE Council when a completed registration and enrollment form is filled out, after completion of the first semester, from an accredited school are received by the Treasurer.
 - B. The scholarship is to be used within one (1) year of receiving it.
 - C. An exception can be made postponing receipt of scholarship for such reasons as health and finances. A request would need to be made.
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1. Name: _____ Birthdate: _____
Address: _____ City: _____
Zip Code: _____ Phone: _____

2. Name of parent, grandparent or guardian associated with: ____ GLC HCE ____ GLC 4-H

<i>Relationship</i>	<i>Name</i>	<i>Address</i>
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3. High School Attending: _____ Graduation Date: _____

4. Grade Point Average: _____ Class Rank: _____ of _____

5. List major school activities in which you have participated and grade you were in during activity: _____

6. List other organizations in which you have been active and grade you were in during activity (such as Scouts, 4-H, Community Service, etc.): _____

7. List your work history (places of employment, position held and dates of employment): _____

8. Name schools or colleges to which you have applied: _____

9. Indicate schools to which you have been accepted: _____

10. What courses will you major in? _____

11. **Essay Section**

Please complete the following questions of not more than 100 words total for all three questions.

11a. *What are your career goals, and why are you choosing these goals?*

11b. *What choices have you made through your high school career to assist you in achieving your goals in college?*

11c. *What circumstances have affected or helped shape your career choice?*

12. Recommendations: Attach recommendations from two (2) non-related sources. These could include your teachers, principal, or employer, if possible.

13. Describe why you are deserving of this scholarship.

14. Please list any additional information or extenuating circumstances which you believe would be of assistance to the scholarship committee. For example, include names of other family members attending college.

15. I have sincerely and accurately completed this form and attached any supporting documentation required.

Signature

Date

Application Deadline: April 1, 2023

Return to:

Green Lake County Extension, Attn: HCE Scholarship, 571 County Road A, Green Lake WI 54941