

***APPLICATION FOR WALP SCHOLARSHIP
(to be completed by sponsoring chapter)***

Please **print using a blue or black ink** or **type**. This form and attachments may be submitted in hard copy, with preference that applications be submitted via e-mail in Microsoft Word and/or PDF format.

Applicant's cumulative grade point average must be at least 3.0 on a 4.0 scale or a "B" average for one year.

Sponsoring Chapter:

Name of Chapter President:

Email:

Name of Chapter Scholarship Chair:

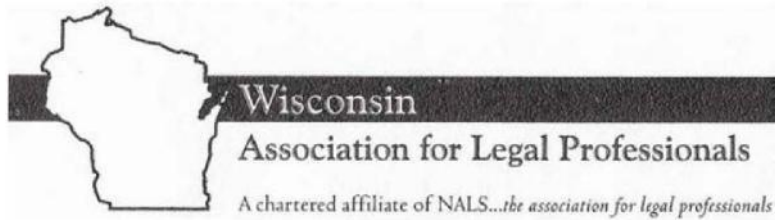
Email:

Telephone (Home/Office/Cell):

State here reason in full why it is necessary for your applicant to receive scholarship aid
(do not attach riders):

State occupation of applicant's father and mother (or person(s) responsible for support of applicant):

State number of children (dependents only) including applicant in family and give ages:



**FOR USE BY WALP EDUCATION SCHOLARSHIP
COMMITTEE:**

Name of Applicant:

Age:

Address:

Email:

Telephone (Home/Cell):

Name of School:

Address of School:

Principal's Name:

Expected Date of Graduation:

Applicant's Signature Date

Chapter President's Signature Date

Chapter Scholarship Chair's Signature Date

RETURN TO:

Mindy Pieper

WALP Education Director
Boardman & Clark
PO Box 927
Madison, WI 53701-0927
mjpieper@gmail.com