SCHOLARSHIP AMOUNT

THE WYSLB SHALL AWARD ANNUALLY EITHER TWO (2) $1000.00 SCHOLARSHIPS OR, IN THE EVENT OF A SINGLE APPLICANT, ONE (1) $1000.00 SCHOLARSHIP.

ELIGIBILITY

APPLICANT MUST BE IMMEDIATE FAMILY OR A CHILD OF A BLET MEMBER FROM A DIVISION WITHIN THE STATE OF WYOMING. BLET MEMBER MUST BE OF GOOD STANDING BY HAVING AT LEAST TWO (2) YEARS OF MEMBERSHIP AND BE CURRENT ON MEMBERSHIP DUES WITHIN THEIR OWN DIVISION.

APPLICANT MUST HAVE APPLIED AND BEEN ACCEPTED BY AN ACCREDITED COLLEGE OR UNIVERSITY FOR ADMISSION.

REQUIREMENTS

IF YOU ARE APPLYING AS A GRADUATING HIGH SCHOOL STUDENT-

CURRENT OFFICIAL TRANSCRIPTS, SAT and/or ACT SCORES, TWO (2) LETTERS OF RECOMMENDATION AND A BRIEF ESSAY ABOUT YOURSELF DETAILING WHY YOU ARE APPLYING FOR THIS SCHOLARSHIP. INCLUDE INTERESTS, ACTIVITIES, ORGANIZATIONS YOU ARE ACTIVE IN AND ANY OFFICES HELD.

IF YOU ARE APPLYING AS A COLLEGE OR UNIVERSITY STUDENT-

CURRENT OFFICIAL TRANSCRIPTS AND A BRIEF ESSAY ABOUT YOURSELF DETAILING WHY YOU ARE APPLYING FOR THIS SCHOLARSHIP. INCLUDE INTERESTS, ACTIVITIES, ORGANIZATIONS YOU ARE ACTIVE IN AND ANY OFFICES HELD.

IF YOU ARE APPLYING AS AN NON-TRADITIONAL STUDENT-

CURRENT OFFICIAL TRANSCRIPTS (IF AVAILABLE) AND A BRIEF ESSAY ABOUT YOURSELF DETAILING WHY YOU ARE APPLYING FOR THIS SCHOLARSHIP. INCLUDE INTERESTS, ACTIVITIES, ORGANIZATIONS YOU ARE ACTIVE IN AND ANY OFFICES HELD.

APPLICATION MUST BE RETURNED TO THE WYSLB SCHOLARSHIP COMMITTEE BY JUNE 1 OF CURRENT YEAR.

MAIL COMPLETED APPLICATIONS AND ALL REQUIRED DOCUMENTS TO:

WYSLB SCHOLARSHIP COMMITTEE
George Johnson
Leg. Rep. Division 207
3601 Garden Creek Rd.
Casper, WY 82601
THIS SECTION FILLED OUT BY APPLICANT

FULL NAME: ____________________________________________________________
ADDRESS: __________________________________________________________________
____________________________________________________________________________
PHONE: ________ - ________ - ________ DOB: ________/_______/_______
EMAIL ADDRESS: ___________________________________________________________

IF A GRADUATING SENIOR-

NAME OF HIGH SCHOOL: ____________________________________________________
CITY AND STATE: __________________________________________________________
ACT SCORE: _________ SAT SCORE: _________ YEAR GRADUATED FROM HIGH SCHOOL: _________
CLASS RANKING: _______ out of _________ CUMULATION GPA: _________

IF A RETURNING STUDENT-

NAME OF LATEST COLLEGE/UNIVERSITY AND DATE OF TERM ATTENDED:
____________________________________________________________________________
CITY AND STATE: _____________________________________________________________
LAST TERMS GPA: _________

COLLEGE/UNIVERSITY APPLIED TO AND ACCEPTED BY:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

COURSE OF STUDY PURSUING:
____________________________________________________________________________
____________________________________________________________________________

SCHOLARSHIPS APPLIED FOR AND RECEIVED: (AMOUNT)
____________________________________________________________________________
____________________________________________________________________________

APPROXIMATE COST PER YEAR: TUITION: $_________ ROOM/BOARD: $_________

THIS SECTION FILLED OUT BY WYSLB BLET MEMBER

FULL NAME: ________________________________________________________________
RELATIONSHIP TO APPLICANT: ______________________________________________
SIGNATURE: _____________________________ DATE: __________________

THIS SECTION IS TO BE FILLED OUT BY THE LOCAL DIVISION SECRETARY-TREASURER

THE ABOVE IS A CURRENT MEMBER OF WYSLB BLET DIV. # ________________ AND OUR DIVISION IS CURRENT WITH WYSLB DUES.
DIV. SEC./TREAS. SIGNATURE: ___________________________ DATE: ____________