

APPLICATION FORM FOR THE BRILLION WOMAN'S CLUB

NAME: _____

ADDRESS: _____

FATHER'S NAME _____ ADDRESS: _____

MOTHER'S NAME _____ ADDRESS: _____

FATHER'S OCCUPATION _____ EMPLOYER _____

MOTHER'S OCCUPATION _____ EMPLOYER _____

NUMBER OF BROTHERS: _____ AGES: _____

NUMBER OF SISTERS: _____ AGES: _____

NUMBER OF BROTHERS AND SISTERS NOW ATTENDING COLLEGE: _____

LIST POST-SECONDARY SCHOOL(S) WHERE THEY ATTEND: _____

INDICATE COLLEGE(S) TO WHICH YOU HAVE APPLIED: _____

INTENDED MAJOR: _____

LIST ALL EXTRA-CURRICULAR ACTIVITIES IN WHICH YOU PARTICIPATED DURING THE HIGH SCHOOL YEARS:

LIST ALL COMMUNITY ACTIVITIES IN WHICH YOU HAVE PARTICIPATED: _____

HAVE YOU HELD ANY PART-TIME JOBS WHILE IN SCHOOL? _____ PLEASE INDICATE EMPLOYER AND DATES OF EMPLOYMENT: _____

OTHER SCHOLARSHIPS APPLIED FOR: _____

ANY SCHOLARSHIPS RECEIVED: _____ ACT SCORE: _____

**PLEASE ATTACH TRANSCRIPT OF GRADES, INCLUDING ALL COURSE WORK THROUGH YOUR SEVENTH SEMESTER.

**IN NOT MORE THAN ONE DOUBLE SPACED TYPEWRITTEN PAGE, INDICATE WHY YOU ARE INTERESTED IN THE FIELD YOU HAVE CHOSEN AND WHAT YOU HOPE TO ACCOMPLISH IN THIS CAREER.

COMPLETE AND RETURN No later than **May 4, 2018** to:

Nancy Ott
Scholarship Committee Chairperson
440 Sunrise Circle
Brillion, WI 54110