
READ DIRECTIONS CAREFULLY

I. General Instructions for all applicants

1. Must be completed by applicant;
2. Must be typewritten or legibly printed in ink;
3. The following documents are required and are to be included with the application:
 - ◆ **Original application plus one copy of your application**
 - ◆ **Two letters of recommendation. One from your core program instructor at a Wisconsin Technical College that you are attending and one from a WAMO member**
 - ◆ **Most recent transcript**
4. Mail completed application to the Western Technical College Foundation, PO Box 908, La Crosse WI 54602-0908 or
Deliver completed application to Western Technical College Foundation Office, Administrative Center, Third Floor, 7th and Main St., La Crosse WI

II. Letters of Recommendation

1. Give recommendation form to core program instructor and WAMO member;
2. Be sure individuals completing the recommendation form follow instructions;
3. All application materials including letters of recommendation, and transcripts must be submitted together.

Is your application complete? Have you...

- ◆ Answered every question?
- ◆ Typed your application or legibly printed it in ink?
- ◆ Included two letters of recommendation (**One letter must be from a WAMO member** and one from a core program instructor)
- ◆ Verified that letters of recommendation are sealed and that the person writing the recommendation placed his/her signature across the sealed portion of the envelope? Letters must be a part of your completed application.
- ◆ Included your transcripts
- ◆ Signed the application
- ◆ Included the original application plus one copy?

To be considered, scholarship applications with all required supporting documents, must be received by the end of each quarter and/or until all awards are made.



**Submit original application
plus one copy of your
application**

WAMO Scholarship Application

Deadline for application: Open until awarded

Mail completed application to Western Technical College Foundation, P.O. Box 908, La Crosse, WI 54602-0908 OR

Deliver completed application to Western Technical College Foundation Office, Administrative Center, Third Floor, 7th & Main St, La Crosse, WI

Legal Name: _____
Last First MI

Social Security Number: _____

Email Address: _____

Date of Birth: _____

Current Address

Street _____ City _____ State _____ Zip _____
 County _____ Telephone Number _____

College Information

College you are currently attending _____

Address _____
Street City State Zip

Name of Program/Major: _____ Graduation Date: _____
Complete Program Name

Length of Program 1 2 Other _____

What year of program/major are you currently in first second other Explain _____

I am currently a Full-time (12+ credits) Part-time Student (under 12 credits) (Fall Semester)

I will be a Full-time (12+ credits) Part-time Student (under 12 credits) (Spring Semester)

Career Goals**0 – 4 points**

What are your short and long-term goals and your plan of action to attain these goals? What role will your educational experience in college play in reaching these goals? Upon graduation how do you plan to contribute to your community both in your career and personal life?

Activities**0 – 4 points**

Please describe your educational history, employment history, volunteerism, hobbies, interests, sports, clubs or organizations you are a member of including offices held, honors you have received and committees you serve/served on over the last two years.

Personal Circumstances

0 – 5 points

Describe those circumstances you wish the Scholarship Evaluation Committee to consider when evaluating your application. For example, financial need, number of dependents, medical expenses, work, personal and/or family responsibilities, travel expenses.

Financial Need Statement

In the space below, explain how you plan to pay for your education.

Please read and sign:

I certify that, to the best of my knowledge and belief, the scholarship information I provided is true correct and complete. I authorize the Western Technical College Foundation to obtain information to verify my eligibility for scholarships from my academic records, transcripts, and/or financial data, as well as my financial aid award letter.

_____ *I grant my permission to release my name, program and address to the scholarship donor.*

_____ *I am a U.S citizen, national, refugee alien, or permanent resident alien.*

Applicant's Signature: _____

Recommendation Form

Name of Applicant _____

Program _____

Reference Name: (please print) _____

Reference Phone: (daytime) _____

Reference Title/Relationship _____

Directions:

1. **Applicant:** Fill in your name and program and ask a core program instructor and a WAMO member to complete this form. Your scholarship application will not be considered unless **two** recommendation forms are received.
2. **Reference:** Complete this recommendation form and written statement.
3. **Place in an envelope.** Sign your name across the sealed portion of the envelope.
4. Return the sealed envelope to the applicant.

All information will be held in confidence. Thank you for your cooperation.

Section I Please check one of the following:

- _____ I am an instructor of the applicant
 _____ I am a WAMO member.

Section II Please use the following scale to rate the application.

Circle the number that corresponds to the most accurate description of the applicant's performance.

The written statement in Section II should justify and/or explain the ratings given below.

5 = Exceptional 4 = Above Average 3 = Average 2 = Below Average 1 = Poor

Academic Progress or Personal Achievement (Grades and/or quality of work)	5	4	3	2	1	NA
Attendance/Reliability (class attendance and/or dependability)	5	4	3	2	1	NA
Attitude/Cooperation (relationship with others)	5	4	3	2	1	NA
Communication Skills (ability to express ideas)	5	4	3	2	1	NA
Leadership (judgment and ability to lead and influence)	5	4	3	2	1	NA
Motivation (initiative, resourcefulness, self-starter)	5	4	3	2	1	NA
Potential for Success (ability to set and achieve goals)	5	4	3	2	1	NA
Work Habits/Organizational Skills (ability to plan, manage, and execute)	5	4	3	2	1	NA

Comments: (If you need more room please feel free to use the back of this page for additional comments)

Reference Signature _____ Date _____