

**CITY OF OSHKOSH SCHOLARSHIP
APPLICATION FORM**

*Please type or print and limit responses to these pages
unless attachments are necessary.*

DEADLINE: Postmarked on or before April 1st

NAME _____ DATE _____

CURRENT ADDRESS _____

HOME TELEPHONE (____) ____-____ CELL PHONE (____) ____-____

EMAIL ADDRESS (Because your school email typically expires after graduation, please use another personal email address if you have one.)

PLEASE PROVIDE AN ALTERNATE CONTACT FOR YOUR APPLICATION. We will only contact this person in the event that your information changes and we cannot reach you.

WHAT IS THIS PERSON'S EMAIL ADDRESS?

WHAT IS THIS PERSON'S PHONE NUMBER?

POST-SECONDARY SCHOOL YOU ARE PLANNING TO ATTEND (Please list the city when listing a community college)

CAREER GOALS (INCLUDING THE FIELD OF STUDY YOU PLAN TO PURSUE):

ADDITIONAL COMMENTS _____

ESSAY REQUIREMENT:

Along with this application form, please submit a 250-word or less essay responding to: “If I were to move back to Oshkosh after graduation, how would I make Oshkosh a better place to live?”.

ATTACHMENTS REQUIRED:

- 1) Typed essay response
- 2) Official letter or verification from Garden County High School showing high school attendance.
- 3) Two letters of recommendation: one from administration, teacher, coach, or staff of the Garden County High School and one from a community member (not related to the applicant).

I authorize representatives of my high school, college, university, vocational or technical school where I attend, and others to provide the Scholarship Selection Committee with any of my personal records or transactions for the purpose of evaluating this scholarship request.

If I accept this scholarship, I am giving my permission to use my name, photo, high school, college/university, and the scholarship I was awarded in any, and all, marketing and communication materials.

I understand that each scholarship is unique and the timing of the payout may vary from scholarship to scholarship including some being paid in the spring or in the second year of college.

Applicant Signature

Date

DELIVER OR SEND THIS APPLICATION AND ATTACHMENT TO:

City of Oshkosh Scholarship Committee
c/o Leann Brown, City Clerk
PO Box 166
Oshkosh, NE 69154

DEADLINE: Postmarked on or before April 1, 2022.

*****YOU WILL BE NOTIFIED OF THE RESULTS OF YOUR APPLICATION*****