**2018 DOUVAS MEMORIAL SCHOLARSHIP APPLICATION**

FIRST GENERATION AMERICAN

Please TYPE or PRINT in **blue** or **black** ink. If printed, information *must be legible.*

Please fill in all indicated spaces.

Applications accepted February through April 2018.

NAME (First and Last):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT’S

STREET ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY, STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ZIP CODE: \_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GRADUATION DATE: \_\_\_\_\_\_\_\_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_

Father’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s place of birth (Country): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year father established residency in the United States: \_\_\_\_\_\_\_\_\_\_\_\_

Mother’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s place of birth (Country): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year mother established residency in the United States: \_\_\_\_\_\_\_\_\_\_\_\_

What do you plan to study? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. If you are awarded this scholarship, which institution do you plan to attend? (Check one)

UNIVERSITY OF WYOMING

CASPER COLLEGE

EASTERN WYOMING COLLEGE

NORTHWEST WYOMING COMMUNITY COLLEGE

WESTERN WYOMING COMMUNITY COLLEGE

SHERIDAN COLLEGE

LARAMIE COUNTY COMMUNITY COLLEGE

CENTRAL WYOMING COMMUNITY COLLEGE

**IF YOU ARE CURRENTLY ENROLLED IN COLLEGE OR IN COLLEGE COURSES, PLEASE WRITE A BRIEF DESCRIPTION OF THE PROGRESS YOU HAVE MADE TOWARD A DEGREE OR CERTIFICATE**:

DO YOU HAVE A PART‑TIME JOB? \_\_\_\_\_\_\_

HOW MUCH DO YOU EXPECT TO HAVE SAVED BY NEXT FALL? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WHAT IS THE TOTAL AMOUNT, IF ANY, YOU WILL RECEIVE FROM

SOCIAL SECURITY, VOCATIONAL REHABILITATION, AND/OR THE

VETERAN’S ADMINISTRATION FOR THE NEXT SCHOOL YEAR? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HAVE YOU BEEN AWARDED ANY OTHER SCHOLARSHIPS? \_\_\_\_\_\_

IF SO, ACCURATELY LIST THE AMOUNT AWARDED FOR NEXT

SCHOOL YEAR. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE SPACE BELOW, **PRINT** OR **TYPE** A *LEGIBLE* SHORT DESCRIPTION OF YOURSELF. INCLUDE ACTIVITIES, HONORS, AWARDS, AND HOW YOU PLAN TO FINANCE YOUR EDUCATION. EXPLAIN YOUR MOTIVATION TO CONTINUE YOUR EDUCATION. ALSO INCLUDE ANY UNUSUAL CIRCUMSTANCES THAT WOULD MAXIMIZE YOUR CONSIDERATION.

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(Continued from page 2 if applicable….)

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Have your current school guidance counselor or principal complete the following for you.

Applicant ranks \_\_\_\_\_\_\_ from the top in a class of \_\_\_\_\_\_\_, with a GPA of \_\_\_\_\_\_\_/4.0.

ACT Composite Score \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Counselor or Principal Telephone Number

The application must be mailed in and postmarked by **April 30, 2018** to:

Bruce Hayes, Program Manager

Douvas Scholarship

Wyoming Department of Education

Hathaway Building, 2nd Floor

2300 Capitol Avenue

Cheyenne, Wyoming 82002-0050