

FREMONT AIRBOAT CLUB

SCHOLARSHIP APPLICATION

FULL NAME (FIRST, LAST)

ADDRESS

CITY, STATE, ZIP

PHONE

EMAIL

AGE

HIGH SCHOOL

GRADUATION DATE

COLLEGE ATTENDING

INTENDED MAJOR

In a few sentences, please tell us why you have chosen your intended field of study and what you would like to do with your degree after you graduate from college.

Reference (Teacher, Guidance Counselor, Employer or other Mentor. *No family members, please.*):

FULL NAME (FIRST, LAST)

RELATIONSHIP

PHONE

BEST TIME TO REACH (DAYTIME/EVENING)

SIGNATURE

PLEASE MAIL APPLICATIONS BY APRIL 1 TO: FREMONT AIRBOAT CLUB, PO BOX 1015, FREMONT, NE 68026