

**WISNER-PILGER PUBLIC SCHOOLS
LOUIS AND ABBY FAYE DINKLAGE FOUNDATION
ALUMNI SCHOLARSHIP APPLICATION**



DEADLINE: APRIL 1

Name _____

Address _____

DOB _____ Sex Male Female High School Graduation Year _____

Name/Address of Parent/Guardian _____

Cell Phone # _____ Email Address _____

College Presently Attending _____

Year in College 1st 2nd 3rd 4th College Name _____ City/State _____

Major _____ Credit Hours Earned _____

Date you expect to complete degree/certificate _____

If awarded, what college should receive the funds _____

I certify the above is true and accurate to the best of my knowledge.

Signature _____ Date _____

Return completed form to: Cheryl Kreikemeier, School Counselor
Wisner-Pilger Jr. -Sr. High School
PO BOX 580 801 18th Street
Wisner NE 68791

To be completed by college official

Name of College:		
Student's Cumulative GPA(3 decimals preferred):		
Signature:	Official Title:	Date:

****Scholarship funds will be distributed in January**