



SHAWANO DOLLARS *for* SCHOLARS

To accept your scholarship, complete this form and return it to:

(Thank you letters can be sent to this address too.)

**Shawano Dollars for Scholars
PO Box 5
Shawano, WI 54166-0005**

Deadline June 1st

Steps for receiving your scholarship:

1. To accept your scholarship, please complete this form and send it to the above address. If you have any questions regarding the form, contact Mr. Stiede at Shawano High School. The form must be completed by June 1st of your freshman year.
2. After the completion of your 1st semester, send a copy of your 1st semester grades or an invoice for 2nd semester to the above address.
3. A check will be sent to the address listed below.

Name: (as it appears on social security card) _____

Social Security Number: _____ Male _____ Female _____

Phone Number: _____

Ethnic Background:

African American/Black

Asian/Pacific Islander

Hispanic/Latino

American Indian/Alaska Native

White/Caucasian

Other: _____

Mailing address:

This is where we will mail your check in January:

Permanent Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Name and address of technical college/university:
