

# APPLICATION FOR KAREN DAILEY MEMORIAL SCHOLARSHIP FUND

For Students who are currently Seniors or enrolled in college

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

Current Grade or year in school or year in college \_\_\_\_\_

COLLEGE OR UNIVERSITY \_\_\_\_\_ GPA \_\_\_\_\_

FINANCIAL AID OFFICE ADDRESS \_\_\_\_\_

Please write a paragraph describing yourself. Write another paragraph describing how you use the funds (at this time \$700). Write a third paragraph about what you want to do with your degree once you have completed college.

Return to: Mary McQuade, 13436 N Melvin Rd., North Platte NE 69101

Due by: September 15, 2022.