



## **LESLIE A. and HELEN R. WILSON MEMORIAL SCHOLARSHIP**

**APPLICATION DEADLINE:** APRIL 20 (annually)

To be eligible, the recipient:

1. Shall be a resident of Webster County and shall have attended a local high school.
2. Is on schedule to complete secondary schooling in the upper one-third of his or her class.
3. Shall plan to be enrolled in a two- or four-year course of study in an agricultural or secondary educational pursuit.
4. Shall be an active participant in his or her church and community, realizing the necessity of being of service to others.
5. Shall submit with his or her application a brief essay expressing professional goals and steps planned in attaining them.

Grantors:

*Jack F. and Marilyn P. Wilson  
Grand Island, Nebraska*

Scholarship administered by  
*The Willa Cather Foundation  
413 N. Webster St.  
Red Cloud, Nebraska*

**WILLA CATHER FOUNDATION  
LESLIE A. and HELEN R. WILSON MEMORIAL SCHOLARSHIP**

**APPLICATION FORM**

**Please type or print clearly. This application must be submitted to the Willa Cather Foundation, 413 North Webster Street, Red Cloud, Nebraska 68970 on or before April 20.**

**PERSONAL INFORMATION:**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_ Social Security Number \_\_\_\_\_

\_\_\_\_\_

Full name of parent or guardian \_\_\_\_\_

**EDUCATIONAL/CAREER PLANS:**

College \_\_\_\_\_

Address \_\_\_\_\_ Major \_\_\_\_\_

\_\_\_\_\_

**Briefly describe/list school, community, and church activities: (this may be an attachment)**

**Awards and other forms of recognition earned for scholastic leadership, and extra-curricular activities: (this may also be an attachment)**

**Please attach a brief essay expressing your professional goals and steps planned to attain them. (400 words or less)**

**WILLA CATHER FOUNDATION  
LESLIE A. and HELEN R. WILSON MEMORIAL SCHOLARSHIP (continued)**

**ACADEMIC BACKGROUND:** (To be completed by high school Guidance Counselor or Principal.)

Student's Name \_\_\_\_\_

Class Rank \_\_\_\_\_ of \_\_\_\_\_

G.P.A. \_\_\_\_\_

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

Date \_\_\_\_\_

High School Guidance Counselor or Principal