INDEPENDENT INSURANCE AGENTS OF NEBRASKA FOUNDATION SCHOLARSHIP PROGRAM

Chet Linder Memorial Scholarship Guidelines

- 1. Applicant must be a current graduating senior who is attending a Nebraska high school that is approved and accredited by the State Department of Education.
- 2. Applicant must demonstrate scholastic application ad intend to continue his/her education. The selection committee will also consider the applicant's participation and leadership in school and community activities, and educational goals.
- 3. There are no criteria relative to gender or financial need.
- 4. Scholarship recipients are free to select any accredited college or university. It is recommended that the applicant intend to major in business or a business-related field
- 5. The Independent Insurance Agents of Nebraska Foundation will determine the number and amount of scholarships to be awarded each year. These numbers and amounts may change annually.
- 6. Scholarships are not awarded until the recipient completes one full year of college with continued evidence of scholastic application and achievement. Recipient must submit evidence of being enrolled as a college sophomore along with an official transcript to the selection committee before scholarship is paid to recipient. In the event that a scholarship winner does not qualify for payment by meeting the above conditions, the gift will lapse. At least one scholarship winner will be awarded to an applicant intending to attend a Nebraska accredited college or university.
- 7. Selections are made by a committee consisting of Foundation directors and community business and professional leaders.
- 8. There is no limitation on persons who are eligible recipients of scholarships. Scholarships will be given without regard to race, creed, religion, nation origin, sex, or employment status of prospective recipients of or any relative of any prospective recipient.
- 9. Notices will be sent to applicants who are selected to receive a scholarship. Applicants may all the Foundation office after May 1to inquire about the status of their application at (402) 476-2951 in Lincoln or 1-800-377-3985.

INDEPENDENT INSURANCE AGENTS OF NEBRASKA FOUNDATION SCHOLARSHIP PROGRAM

Application for Chet Linder Memorial Scholarship

This application must be submitted on or before March 1 to: Selection Committee, Independent Insurance Agents of Nebraska Foundation, 8231 Northwoods Dr., Lincoln, NE 68505

PLEASE PRINT OR TYPE:

Section 1. Information to be supplied by appl	licant	
Student's Full Name:		
e of Birth: Soc. Sec. No		
Full name of parent or guardian:		
Permanent Address of Parent or Guardian (str	reet or route, town, co	ounty, state, zip)
In the space below, briefly summarize your so memberships and offices held. (May attach a	2	y activities. List organization
What college do you plan to attend?	-	
Date you expect to enter (Month/Year):		
Please list all other scholarships, awards or fir for the coming school years.	nancial aids for which	h you have applied, or have been granted
Name of Financial Aid	<u>Value</u>	Has it been granted?
What will be your major area of college study	and what are your e	educational plans?
Why do you believe you should be awarded t	this scholarship? (u	se separate sheet for answers.)

scholarship winner, the applicant agrees to provide the Selection Committee with evidence of being enrolled as a college sophomore and an official college transcript after his/her first full year of college. Signature of Applicant After you have completed your part of this application, present this to your financial aid adviser for certification and delivery to the scholarship selection committee. **Section II.** Information to be supplied by Principal or counselor This is to certify that the above applicant ranks in a class of seniors. Date of high school graduation will be _____. The applicant has taken the following college entrance examinations under a statewide testing program: Name of Test **Score** The Committee would appreciate a brief statement concerning your evaluation of this applicant's citizenship and worthiness for scholarship consideration. (Use a separate sheet for statement) Date: ____ Principal or Counselor Name of High School: Mailing Address: _____ APPLICATION MUST BE SUBMITTED ON OR BEFORE March 1 TO: Selection Committee Independent Insurance Agents of Nebraska Foundation 8231 Northwoods Dr., Ste B Lincoln, NE 68505 Questions? Call the Foundation Office at (402) 476-2951 in Lincoln or 1-800-377-3985

The applicant herewith consents that the Scholarship Selection Committee be fully informed as to the applicant's standing and other factors having a bearing on this application. If the applicant is chosen as a