



Forest History Association
of Wisconsin, Inc.

<http://www.chipsandsawdust.com>

APPLICATION FOR SCHOLARSHIP - 2016

Date _____

Full Name _____

Permanent address _____

City _____ State _____ Zip _____

Telephone (_____) _____ (_____) _____
Day Evening

Email _____

University/Collage attending _____

Expected graduation date _____

Major _____

Release and Certification I hereby give permission to use the information provided on this application for recognition purposes, if selected. I understand that I must be registered or accepted as a full-time student at an accredited Lake States college or university to be eligible to receive a scholarship.

To the best of my knowledge, the information provided in this application is true and correct. I also hereby attest that the essay submitted is an original work product and subject to verification.

Student's signature _____ Date _____

Mail to:

Forest History Association of Wisconsin
Attn: Scholarship Committee
1435 Neva Rd.
Antigo, WI 54409