

Please type this form

Florence Winings Scholarship

Information Questionnaire

Name _____ Age _____

I plan to attend _____ next year and
major in _____.

Please complete the following:

1. I have chosen the career of _____ because:

2. I intend to finance my education as follows:

3. I would like to receive the Winings Scholarship because:

(signature)

(date)

Do not write in this space
Cum. GPA through 7 semesters _____
Class rank through 7 semesters _____

APPLICATION DUE MARCH 1ST