WICHITA LEGAL PROFESSIONALS
SCHOLARSHIP AWARD

Wichita Legal Professionals ("WLP"), shall award two $500 scholarships on the basis of scholastic achievements, future career goals, demonstration of financial need, and leadership ability. Applications should be printed or typed and submitted to the WLP Scholarship Chairperson no later than January 20, 2017.* Copies of this application may be machine reproduced.

Eligibility Requirements:

(a) Be a citizen of the United States;
(b) Be a resident of Kansas;
(c) Be a (i) high school senior, or (ii) a high school graduate (or received a GED);
(d) Plan to enroll or are enrolled in a school of advanced education; and
(e) Document financial need.

Instructions: Attach to all copies of this completed application the following:

1. Official high school transcript (or a GED certificate) and any college transcript. If applying as a non-traditional/returning adult student, please provide a Letter of Acceptance or Verification of Enrollment from the advanced education facility.

2. Two (2) one-page letters of recommendation from someone other than a WLP member or a member of applicant’s family. Letters must be signed and should include the following information:
   (a) Author’s relationship to the applicant.
   (b) Applicant’s activity and leadership record in school and/or community.
   (c) Description of applicant’s character, personality, initiative and work skills.
   (d) Applicant’s financial need and home background.

3. A one-page autobiographical statement in narrative form prepared by the applicant, which should include the following:
   (a) Applicant’s school activities (honors, clubs, etc.), family background and hobbies.
   (b) Applicant’s goals with respect to a career in his/her major of study, including information pertaining to employment held, classes taken, etc., to help achieve applicant’s goals and why applicant desires further education and training.
   (c) Applicant’s significant accomplishments, activities and experiences to date, including any honors, recognitions, awards, community activities, or positions of responsibility or importance to applicant.

The careful and detailed completion of this Application is very important. The answers to the questions on the following pages of the Application, and attachments hereto, will be kept in strict confidence.

*SIGN AND SUBMIT the completed Application by January 20, 2017, to: Elizabeth A. Satterly, WLP Scholarship Chairperson, 100 N. Broadway, Ste. 950, Wichita, KS 67202 or via email at satterly@hitefanning.com.
SCHOLARSHIP APPLICATION

BIOGRAPHICAL DATA

Name: ____________________________  Last  First  Middle

Address: __________________________
          Number  Street  City  ZIP Code

Phone: ____________________________  Day (include area code)
          Evening (include area code)

Birthday: __________________________
          Month/Day/Year

Current Employer: ________________________________

Address: ____________________________
          Number  Street  City  ZIP Code

Years Employed: ____________  Hours Worked Per Week: _________

Marital Status (single/married/separated/divorced/widowed): _______________

If Married and/or Have Dependents:

Spouse's Full Name: ____________________________  Last  First  Middle

Spouse's Occupation: ________________________________

Children's Names and Ages: ________________________________

If Single and Dependent on Parents:

Parents' Full Names: ________________________________

Parents' Occupation: ________________________________

Siblings' Names and Ages: ________________________________
EDUCATIONAL DATA

Institution to be attended for period financial assistance is needed:

Name: ____________________________________________________________

Address: _______________________________________________________

Number  Street  City  State  ZIP Code

Proposed Major of Study: __________________________________________

Are you a member of Wichita Legal Professionals/Kansas Legal Professionals, Inc.?
   Yes  ___  No  ___

FINANCIAL DATA

During the school year for which scholarship assistance is requested, Applicant will:

_____ Reside with parents  _____ Reside in college housing

_____ Reside with spouse and/or children  _____ Maintain separate household

List school expenses known or estimated in the school year for which this application is made:

Tuition  $_______  Travel expenses  $_______

Books/Supplies  $_______  Room/Board  $_______

Total known or estimated expenses: ________________________________

List known or estimated income projected for school purposes in the school year for which this application is made:

From immediate family (spouse or parents)  $________________

From other relatives and friends  $________________

From personal loans  $________________

From own employment  $________________

Other scholarships, grants, etc.  $________________

Total known or estimated income  $________________
Applicant’s Financial Status:

Applicant’s net income for past tax year $ ____________

Spouse’s net income for past tax year (if applicable) $ ____________

Parents’ net income for past tax year (if applicable) $ ____________

VERIFICATION

I certify that to the best of my knowledge and belief, the information contained in this application is true, complete, and accurate.

Dated: ________________

________________________
Signature of Applicant

Dated: ________________

________________________
Signature of Applicant’s Parent or Guardian if a Minor

Sponsored by Wichita Legal Professionals, a local chapter of Kansas Legal Professionals, Inc.