

The Wasie Foundation Endowed Scholarship Application for 2019-2020

DUE MARCH 1, 2019 Please read all type or print in black or blue ink.

1. PERSONAL INFORMATION

POLISH FAMILY NAME: _____ LAST NAME: _____

MAIDEN NAME: _____ FIRST NAME: _____

MIDDLE NAME: _____ DATE OF BIRTH: _____

EMAIL: _____

HOME PHONE: _____ CELL PHONE: _____

PERMANENT STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

(All correspondence regarding this application will be directed to your permanent street address.)

CURRENT STREET ADDRESS:

CITY: _____ STATE: _____ ZIP: _____

CITIZENSHIP (Circle one): United States Poland Dual US/Poland

2. FAMILY INFORMATION

FATHER'S FULL NAME: _____

% POLISH (if applicable): _____ PHONE: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

MOTHER'S FULL NAME: _____

% POLISH (if applicable): _____ PHONE: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____



3. APPLICANT STATUS Check correct statement

- This is my first Wasie Endowed Scholarship application
- I applied for a Wasie Endowed Scholarship before, but did not receive one.
The year(s) applied: _____
- I am a previous Wasie Endowed Scholarship recipient
The year(s) received: _____

4. INSTITUTIONAL STATUS: CLASS STANDING FALL 2019 Check one

- Freshman Sophomore Junior Senior

MAJOR: _____ ANTICIPATED GRADUATION (Month/Year): _____

5. EDUCATIONAL HISTORY Please list all schools attended (high school to present)

HIGH SCHOOL: _____ DATES ATTENDED: _____ GPA: _____

Circle one **DIPLOMA** **GED**

POST-SECONDARY: _____ DATES ATTENDED: _____ GPA: _____

DEGREE/MAJOR: _____ LEVEL OF EDUCATION (years): _____

POST-SECONDARY: _____ DATES ATTENDED: _____ GPA: _____

DEGREE/MAJOR: _____ LEVEL OF EDUCATION (years): _____

OTHER: _____ DATES ATTENDED: _____ GPA: _____

DEGREE/MAJOR: _____ LEVEL OF EDUCATION (years): _____

Circle exams taken and provide score:

SAT/ACT Score: _____ TOEFL/ELTS Score: _____ Other: _____ Score: _____



6. CERTIFICATION AND AUTHORIZATION

Review and sign this application. Unsigned applications are not considered.

By signing below, I certify that I have read, and I understand, my responsibilities in completing this application package. I certify that all of the information in this application package, including the application form, essay, and transcripts, is true and complete to the best of my knowledge. If at some time it is determined that the information I submitted is untrue, the Wasie Endowed Scholarship, if granted, will be terminated, and any funds received by me will be refunded to The Wasie Scholarship Program at The College of St. Scholastica. I hereby authorize the release and exchange of any information requested by The

Wasie Foundation or its representatives regarding this scholarship application.

SIGNATURE: _____ **DATE:** _____

CONDITIONS

To receive a Wasie Endowed Scholarship you must be a full-time undergraduate or an entering full-time student. Since the Wasie Endowed Scholarship is based on financial need, **YOU MUST ALSO APPLY FOR FINANCIAL AID BY MARCH 1, 2019.** The College will make the final decision about scholarship recipients and contact all applicants regarding their status by May 2019.

APPLICATION REQUIREMENTS

A. OFFICIAL TRANSCRIPTS

- Your application must include OFFICIAL transcripts from your last THREE FULL YEARS of school.
- Contact your school(s) to get your official transcripts or to have them sent directly to The College of St. Scholastica.
- If you are currently in college, please be sure to include your first semester OFFICIAL transcript.

B. SIGNED CERTIFICATION (page 2)

C. ESSAY (2-3 pages in length, typed, double-spaced) Your essay must address all of the following:

- Please tell us about your Polish family history. This is a very important part of the essay.
- What are your academic goals?
- What are your career goals?
- Please describe your recent achievements (within the last 12 months).
- Please describe your community involvement and/or volunteer activities during the last 12 months.
- Please write about your personal interests.
- Please write about the extracurricular activities in which you have participated during the last 12 months.

**REMEMBER – ALL APPLICATION MATERIALS ARE DUE BY MARCH 1, 2019.
LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

Mail your application package to:

Bryan Karl
Director, Undergraduate Admissions
The College of St. Scholastica
1200 Kenwood Avenue
Duluth, MN 55811

If you have any questions, please contact Bryan Karl at bkarl@css.edu.



The College of
St. Scholastica