

Veronica G Wolfenden Memorial Scholarship

1. **Two scholarships** will be awarded to graduating seniors from Wonewoc-Center High School. Each recipient must be enrolled in a **one or two year postgraduate program (Technical School)**.
2. Selection will be based on GPA, high school attendance, and paragraph writing.
3. Recipients will each be awarded \$500, the money sent in two installments. Installments will follow semester one and semester two. Payment is contingent upon the student's being enrolled on a full-time basis and maintaining at least a "B" average.
4. Preference *may* be given to a cosmetology student.
5. These scholarships are awarded at the discretion of the scholarship administrator.
6. The application is to be **postmarked** by **April 1**.
7. Applications should be sent to:
Carol Wolfenden
S464 Tower Road
Kendall, WI 54638-9601
(608) 489-2209

Applicant Name: _____

Address: _____

Phone: _____

Parents' Names: _____

Intended Area of Study: _____

Intended School & City: _____

On a separate sheet of paper, **type** a 100+ word paragraph(s) stating why you deserve this scholarship.

School Counselor: GPA: _____

Attendance: _____

Signature: _____