



ELDRED WWII MUSEUM AND LEARNING CENTER
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CAPTURING HISTORY ALIVE

Application for Scholarship

Applicants and their information will be kept **confidential**,
 except to screen and review for award and to release their name only for post award publicity if award is given.

Name: First, MI, Last		
Home Address:		
City, State and ZIP:		
Email:		
Day phone:		Alternative phone:
Why am I applying? Scholarship will be used for: (Please be specific)		
Years in college:		
<u>Institution</u>	<u>Year</u>	<u>Major</u>
I attest to the authenticity of the submitted information to the best of my ability.		
Date and Signature _____		