NextGrad Warrior Success Scholarship

This nonrenewable $1000 scholarship is only available to 2021 WHS graduates who have experienced a challenge, setback or failure.

Criteria:

\*Must have overcome obstacles.

\*Must plan to continue education at an accredited post-secondary school.

Requirements:

\*Completed application form turned into the counseling office by April 30, 2021. You can complete this form or attach typed information.

\*Letter of recommendation. (Use form provided.)

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of post-secondary institution you plan to attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intended major/course of study at institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Activities, athletics, volunteering, or work experience:

Please include all activities in and out of school in which you have participated during 9-12th grade. Include any awards you have received or leadership roles you have held.

The lessons we take from obstacles we encounter can be fundamental to later success. Recount a time when you faced a challenge, setback, or failure. How did it affect you, and what did you learn from the experience?

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Recommendation Form

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The student is applying for a scholarship and has asked for your recommendation as a part of the application process. All recommendations are kept strictly confidential.

\*Attach additional sheets of paper if necessary.

\* When finished, place form in a sealed envelope and write your name across the seal.

\*Return to the applicant as soon as possible.

1. How long have you know this applicant and in what capacity?

2. Why do you think this applicant is a good candidate for this scholarship?

3. Are you aware of any obstacles the applicant has had to overcome? If so, please share any information you feel would assist the selection committee.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Phone number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name