

Your Touchstone Energy® Cooperative

APPLICATION DEADLINE Thursday, April 1, 2021

FIRST TIME APPLICATION

SCHOLARSHIP APPLICATION

Name:	Parents:
Address:	Does Central Wisconsin Electric Co-op provide electricity to yours or your parents' home? Have you previously received a scholarship from CWEC?
Phone:	Email
Which College or Tech School will/are y	you attending? What are your career plans?
High School Organizations & Communit	ty Volunteer Work:

Please list your high s	school and year of grad	duation:	
Your hopes, aspiration	ns for the future:		
Any other information	n you would like us to	consider:	
List 3 References—T	eachers, Clergy, Com	munity Leaders or Others.	
Name		Phone Number	
Position			
Name		Phone Number	
Position			
Name		Phone Number	
Position			
		ned in this application is true and sed for one of the following – to	I I promise that any scholarship I aition, books or housing.
Signature	Date	_	