



## **SDWWA Annual Memorial Scholarship- Application and Criteria**

1. Provide documentation of acceptance/enrollment in a post-secondary educational institution from registrar of the institution.
2. The Parent/Step-parent/Legal Guardian of applicant must be a member of SDWWA for 3 of the past 5 years, including the year of application.
3. Applications must be received between September 15th – March 15th preceding year of award.
4. The Scholarship Committee shall consider all applications and announce the scholarship winner at the Annual Conference in September.

### **Please print legibly**

Date of Application: mm/dd/yyyy

\_\_\_\_\_

Name and address of applicant:

\_\_\_\_\_

Email address:

\_\_\_\_\_

Phone number:

\_\_\_\_\_

Parent of applicant: name/address

\_\_\_\_\_

Phone number:

\_\_\_\_\_

Parent has been a member of  
SDWWA for 3 of the past 5 years,  
including year of application  
→ See item # 2 above

\_\_\_\_\_ Answer yes or no

Name of post-secondary  
Educational Institution

\_\_\_\_\_

Location (city and state) of post-  
secondary  
Educational Institution

\_\_\_\_\_

Signature of Applicant:

\_\_\_\_\_

Signature of Applicants parent  
who is a member of SDWWA

\_\_\_\_\_

\_\_\_\_\_

**The scholarship committee will verify all information.**

Please print this form, fill it out, and mail to the following address:

Kim Verhey, Chairman  
SDWWA Memorial Scholarship Committee  
902 N. Lincoln Ave.  
Madison, SD 57042