

John J. and Doris M. Buford Legacy Fund Scholarship QUALIFICATIONS & CRITERIA

To qualify for the scholarship, a student must fit within the following charitable class:

- a. Be a current, graduating high school senior; or
- b. Be enrolled full-time (minimum of 12 hours) in undergraduate study at an institution of higher learning; and
- c. Must enroll to major or is currently majoring in nursing or pre-law.

Selection of the scholarship recipient shall be made from the qualifying applicants of the aboveidentified charitable class, based on the following criteria:

- a. A letter from the high school office stating that the applicant maintains a standard GPA of 2.5 or higher.
- b. Involvement in non-academic, extra-curricular activities. Scouting experience preferred, but not required.
- c. Submission of the application by the <u>deadline</u> date.
- d. Submission of a verification of the student's semester grades and continued enrollment in high school or the institution of higher learning.

E-mail completed application and supporting documents to: scholarship@midlandscommunity.org

OR Deliver or send completed application and supporting documents to:

> John J. and Doris M. Buford Legacy Scholarship c/o Midlands Community Foundation 217 North Jefferson Street Papillion, NE 68046 scholarship@midlandscommunity.org

Selection of the scholarship recipient shall be made from the qualifying applicants of the above-identified information.

DEADLINE: March 17, 2025



John J. and Doris M. Buford Legacy Fund SCHOLARSHIP APPLICATION

DEADLINE: March 17, 2025

<u>Purpose</u>: The John J. and Doris M. Buford Legacy Scholarship is available to graduating high school seniors or full-time college students studying in the fields of Nursing and Pre-law.

<u>Award</u>: The Fund shall annually distribute two (2) scholarships in the amount of \$1,000 each.

| Date: | | |
|--|--------------------|-------------|
| Student Name: | | |
| Address: | | |
| City: | State: | _ Zip Code: |
| Date of Birth: | | |
| Cell/Home Telephone: () | Social Security #: | ••• |
| Parents"/Guardians' Names (if applicable): | | |
| O Mark if address is same as applicant. | | |
| Parents' Address: | | |
| City: | State: | _ Zip Code: |
| What High School do you attend? | | |
| What College do you plan to attend? | | |
| Nursing: Pre-law: | | |
| Scouting experience preferred, but not required: | | |
| Scouting Experience (BSA): Yes: No: | | |
| Eagle Scout Recipient: Yes: No: | | |

What activities are you involved in or what are your interests (50 words or less)?

What are your reasons for entering this field? What are your career goals (250 words or less)?

Please list your work experience (if applicable):

Applicant Signature

Date

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