



**Papillion Softball Woolhiser Memorial Scholarship Fund
APPLICATION GUIDELINES**

(Please type responses to these pages. If you need to attach additional pages, please mark appropriately.)

DEADLINE: April 1, 2025

Purpose: *The purpose of the Fund is to encourage, solicit, receive, and distribute scholarships to assist qualified recipients in their pursuit of higher education who are currently or have participated in the Papillion Recreational Organization Softball Program for a minimum of (3) three years and attends high school in the Papillion LaVista School District.*

Award: *The Fund shall annually distribute four (4) scholarships ((2) to Papillion LaVista High School for \$850 and (2) to Papillion LaVista South High School for \$850).*

CRITERIA

Must meet this to qualify for application process:

- a. Must be a current, graduating female senior from the Papillion LaVista School District.
- b. Must have played in the Papillion Softball Organization.

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

- a. The recipient does not need to show financial need.
- b. A letter from the school office stating that the applicant has maintained a minimum of 2.5 GPA.
- c. Submission of a verification of the student's continued enrollment from the high school.
- d. Submission of the application by the deadline date.



**Papillion Softball Woolhiser Memorial Scholarship Fund
SCHOLARSHIP APPLICATION**

(Please type responses to these pages. If you need to attach additional pages, please mark appropriately.)

DEADLINE: April 1, 2025

Criteria: Is a graduating female senior from Papillion LaVista and Papillion LaVista South High Schools and who have participated in the Papillion Recreational Organization Softball Program for a minimum of (3) three years.

Student Name: Last: _____ First: _____ Date: _____

Current Address: _____

CELL/HOME TELEPHONE: (____) _____ - _____ SOCIAL SECURITY #: _____ - _____ - _____

PARENTS'/GUARDIANS' NAMES & ADDRESSES (IF DEPENDENT): _____

DATE OF BIRTH: _____

Father: _____

Occupation: _____

Employment: _____

Mother: _____

Occupation: _____

Employment: _____

I live with: Mother
 Father
 Both Parents
 Other: _____

Siblings:

Name: _____ Grade: _____ School: _____

Name: _____ Grade: _____ School: _____

Name: _____ Grade: _____ School: _____

List the Colleges, Universities, Community Colleges or Vocational/Technical Schools wanting to attend:

First Choice: _____

Second Choice: _____

List all Scholarships you have been awarded as of the date of application (University – Amounts -Renewable):

1. _____

2. _____

Work Experience (Employer – Dates – Contact Information):

1. _____

2. _____



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1. What community service activities have you been involved in and why?

2. Discuss an experience or your overall involvement with the PRO-Softball that influenced or impacted your development?



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3. Why do you want this scholarship? Include any extenuating financial circumstances.

4. What are your goals for the future? What are you doing to obtain these goals?



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Please Attach to the Scholarship:

1. Transcript from High School – applicant must maintain a standard GPA of 2.5
2. Attach an applicant resume.

Applicant Signature

Date

DELIVER OR SEND THIS APPLICATION AND ATTACHMENTS TO:

Midlands Community Foundation
c/o Papillion Softball Woolhiser Memorial Scholarship Fund
217 N. Jefferson Street
Papillion, NE 68046
scholarship@midlandscommunity.org

DEADLINE: April 1, 2025

*****YOU WILL BE NOTIFIED OF THE RESULTS OF YOUR APPLICATION*****