



Lincoln Kiwanis Foundation

Scholarship Application Education Funds Request

Thank you for your interest in the Kiwanis of Lincoln Scholarship/Education Program. Please review the guidelines and complete the application information below.

Date of Application: _____

Guidelines

- Provide letter of recommendation;
- Include a one-page, typed explanation outlining your request for a scholarship/funds and how it will assist you in your educational goals.
- Include any additional supporting documents you feel necessary.

Application Information

A.	Name:	
B.	Age:	
C.	Mailing Address:	
D.	Home Telephone #:	Cell Telephone #: Email Address:
E.	Father/Mother or Guardian Occupation	

When completed, please mail this application with all required documentation to attention of the Kiwanis Foundation Trustees at PO BOX 1094 Lincoln 95648. If you have any questions about the application process, please call Estelle Holway @ 916-408-4124 or email weholway@wavecable.com

Staff Use Only
Date Approved:
Amount Approved \$
Account Charged:
Date Required:
Make Check Out To: