

**Wyoming Lifelong Learning Association
Paul Kipper Scholarship Application**

Date: _____

Applicant: _____

Home Address: _____

City, State. Zip: _____

Social Security Number: _____

Home Telephone: _____

Academic year for which
you applying: _____

Education Information

Name and address of college you plan to attend: _____

Officially admitted to graduated school? Yes No When _____

Credit hours completed at the end of current semester: _____

Your graduate major: _____

Expected date of graduation: _____

Earned degrees:

Title	Major	Date	Institution

Attach a brief summary outlining your educational goals and career aspirations. Indicate how this award will assist you in achieving your educational goals. Do not exceed two typewritten pages, double-spaced.

Financial Information

Married	Single			
Number of Dependents:	Attending school: Yes No		Attending College: Yes No	
Family income:	\$10k – 15k	\$15k – 20k	\$20k – 25k	Above \$25k
Applicant's expected income during the year \$				
Applicant's expenses:				
Tuition and Fees				
Books and Supplies				
Travel				
Room and Board				
Total expenses				

Applicant's Statement

If I am granted the Paul Kipper Scholarship, I understand and affirm the following:

I must be enrolled in a graduate degree program to receive this award. If I withdraw from graduate school after one semester (or quarter), I will forfeit the remainder of the award.

All the information stated herein is true and correct to the best of my knowledge. Swearing to false statements may cause forfeiture of any award and my demand repayment.

Applicant's Signature: _____

Date: _____

Return application to:

Christy Stocks
PO Box 416
Baggs, WY 82321
cstocks@cchec.org