

**KANSAS STATE BRANCH
NATIONAL LEAGUE OF POSTMASTERS
SCHOLARSHIP APPLICATION FORM**

Name: _____

Date: _____

Parent, Grandparent, or Guardian's Name (Include League Status) _____

Home Address: _____

Telephone Number: _____ E-mail: _____

Date of High School Graduation: _____

Name of High School Attending: _____

High School Principal and Phone Number: _____

List School, Community Religious Activities and Accomplishments (on separate sheet)

Please write a hand written essay (one page or less) telling about yourself, your ambitions, and past learning experiences (use a separate sheet of paper)

Parent's signature and date: _____

Student's signature and date: _____

Application Requirements:

1. Applicant must be a high school senior or college freshman or sophomore.
2. Applicant must be a child whose parent, grandparent or legal guardian is a current or retired, dues paying member of NLPM-Kansas Branch.
3. Applicant must complete and submit application form postmarked NO LATER THAN MARCH 31.
4. After you have completed the Scholarship Application, please enclose a transcript of your school record, application form, and one page hand written letter in an envelope addressed to:

Judy Smith
13298 US HWY 159
Muscotah, KS 66058-3021
E-mail: judysmith@rainbowtel.net