

THE FLEMING FAMILY FOUNDATION
SCHOLARSHIP APPLICATION

Deadline:

Send to:

Randy Fleming, President

P. O. Box 410

Springfield, NE 68059

(402) 210-4885

Fax: (402) 253-2208

Or Email it to auctioneer_32@msn.com

Name: _____

Address: _____

Phone: _____

Email: _____

Social Security Number: _____ Age: _____

Are you a U.S. Citizen? _____

Have you ever been convicted of a felony? _____

Name and Address of the school you plan to attend or are attending now? _____

Starting Date _____ Expected Date of Graduation _____

Are you currently employed? _____

Name of Employer, type of work _____

Names and Addresses of those individuals who have been asked to provide letters of recommendation.
Three are required.

Name

Address

Please outline your financial need at this time. Please list all other scholarships, grants in aid and/or other financial assistance you are now receiving or to which you have made an application.

Please describe your participation in school, church and community activities.

What influenced you in selecting your college and your career goals?

Where do you see yourself professionally upon graduation?

Please forward your school transcripts to Foundation.

Signature

Date

Date Received: _____