Walworth County Human Resource Association Scholarship Application Process

The Walworth County Human Resource Association will offer two scholarships annually. Payment will be distributed to the student upon confirmation of enrollment the following fall semester.

Applications will be accepted until May 15, 2015 for scholarships to be distributed for the following fall term. The WCHRA Board of Directors will review all applications and select recipients based on the following criteria:

- 1. Timely submission of the completed application materials <u>along with a copy of student's current transcript</u> by the deadline date of May 15, 2015. GPA will be considered in the event of a tie in the selection process.
- 2. The student must be actively pursuing a major or minor in human resources, supervisory management, or a related discipline focusing in human resources management. Students must have graduated from a Walworth County High School.
- 3. One scholarship in the amount of \$500 will be awarded to a student who is currently attending a four-year institution and will be entering their sophomore, junior, or senior year in a human resources related program.
- 4. One scholarship in the amount of \$250 will be awarded to a student who is at least halfway through a human resources generalist certificate program or who will be entering the third semester in a supervisory management or human resources-related associate degree program at a two-year institution.

Questions regarding the application process can be directed to Ciara Huntemann, Scholarship Chair, at 262.275.2161 x17.

Please return completed application to: Integra Seating Attn: Ciara Huntemann 807 Wisconsin Street Walworth, WI 53184

PLEASE NOTE: WCHRA reserves the right to withdraw or change the amount of any scholarship award based on lack of scholarship funding, misrepresentation of information by the applicant or withdrawal from the education institution by the designated applicant(s), or for any other reason at any time with or without notice as may be necessary. Proof of enrollment must be provided before any scholarship award will be paid. Scholarship awards will be paid directly to the applicant's educational institution for the purpose of tuition.

Walworth County Human Resource Association

Scholarship Application Addendum

PLEASE PRINT OR TYPE.

Applicant Name					
Last Name		First	Name	Middle Initial	
Address					
Street	or P.O. Box	City	State	Zip Code	
Please answer the	following questions to the best o	f your ability.	Attach a separate sheet if n	ecessary.	
1. Please state the i	reasons why you decided to continue	e with your edu	cation in the Human Resource	es field.	
2. Please describe organization.	what you believe is the key role of to	oday's human r	esources professionals within	their	
3. What do you beli	eve are the top two (2) challenges fa	acing the huma	an resources profession in the	future?	
	cialize in one functional area of hum ention, organizational/employee dev			k why?	

Walworth County Human Resource Association Scholarship Application Form

Applicant Name								
Last Name				First Name		N	Middle Initial	
Address Street or P.O. Box				<u> </u>				
Street or P.O. Box				City		State	Zip Code	
Home Phone No			Date o	of Birth				
Include Area	Code							
High school you graduated from					Year	r		
College you are attending				College GPA				
Major Subject Area (College)								
Minor Subject Area (College-if a	pplicable)							
Anticipated College Graduation	Date		Reside	ence: 🗆 Dorm	n 🗌 Off-campus 🔲	Commuter		
Please indicate your approximat	e total family or to	otal hous	sehold ir	ncome:				
☐ Under \$10,000	□ \$10,000-\$	25,000		□ \$25,000	-\$50,000			
□ \$50,000-\$75,000	□ \$75,000-\$	3100,000)	□ Over \$1	00,000			
Have you applied for financial ai	d through your in	stitution'	?	□ Yes □ I	No			
Total amount of your financial ai	d awarded for the	2011-2	012 sch	ool year?_\$				
					ude ALL sources			
Total amount of your education	expenses the 201	11-2012	school y		ude tuition, books, roor	n & board		
Place of Employment								
				_Phone No				
Street Address	City	State	Zip Code	_	Include Area Co	de		
Avg. No. of Hours per Week	Supervisor's	Name_						
Please list any extra-curricular a specific groups you are associat					-competitive spor	ts, hobbi	es, or	
specific groups you are associate	GU WITT. (ATTACH a SE	parate sne Date(oary).	Honors/Let	ters Rec	eived	
Activity			cipation	1	or Office(s)	Held		

Please describe any community service activities in which you have participated. (attach a separate sheet if necessary):
Please describe your career goals over the next 3-5 years in the human resources field.
Please discuss any other information you would like us to be aware of that is relevant to your application for scholarship.
I certify that the above information is true & correct to the best of my knowledge. I fully understand that any misrepresentation of this information may jeopardize my receipt of any scholarship funds to be awarded as well as any funds already disbursed to me.
Signature of Applicant Date of Application
orginataro or Application
For WCHRA Use only
Date Application ProcessedDate of Approval
Reviewed By
Amount of AwardDate of Award