



Independent Insurance Agents of Nebraska

Independent Insurance Agents of Nebraska Foundation

8231 Northwoods Dr., Ste B * Lincoln, NE 68505 * (402) 476-2951

\$750 SCHOLARSHIP---NOW ACCEPTING APPLICATIONS

TO: GUIDANCE COUNSELORS – NEBRASKA HIGH SCHOOLS

The Independent Insurance Agents of Nebraska Foundation is now accepting applications for three Chet Linder Memorial Scholarships each in the amount of \$750. **At least one scholarship will be awarded to an applicant intending to attend a Nebraska accredited college or university.**

The Foundation is a not-for-profit corporation organized under the laws of the State of Nebraska in 1989 for educational uses and purposes.

Selection of the scholarship winner will be based on scholastic application, as well as participation and leadership in school, community activities, and educational goals. There are no criteria relative to gender or financial need.

Scholarship guidelines and an application are enclosed. Please announce the availability of the scholarship to your senior students. **The applications must be postmarked by March 1, 2009.** Please do not hesitate to call the Foundation office, in Lincoln at (402) 476-2951 or 1-800-377-3985 if you have any questions.

Thank you for your assistance!

Keith M. Limbo
President

Enclosures



INDEPENDENT INSURANCE AGENTS OF NEBRASKA FOUNDATION SCHOLARSHIP PROGRAM

Chet Linder Memorial Scholarship Guidelines

1. Applicant must be a current graduating senior who is attending a Nebraska high school that is approved and accredited by the State Department of Education.
 2. Applicant must demonstrate scholastic application and intend to continue his/her education. The selection committee will also consider the applicant's participation and leadership in school and community activities, and educational goals.
 3. There are no criteria relative to gender or financial need.
 4. Scholarship recipients are free to select any accredited college or university. It is recommended that the applicant intend to major in business or a business-related field.
 5. The Independent Insurance Agents of Nebraska Foundation will determine the number and amount of scholarships to be awarded each year. These numbers and amounts may change annually.
 6. Scholarships are not awarded until the recipient completes one full year of college with continued evidence of scholastic application and achievement. Recipient must submit evidence of being enrolled as a college sophomore along with an official transcript to the selection committee before scholarship is paid to recipient. In the event that a scholarship winner does not qualify for payment by meeting the above conditions, the gift will lapse. **At least one scholarship winner will be awarded to an applicant intending to attend a Nebraska accredited college or university.**
 7. Selections are made by a committee consisting of Foundation directors and community business and professional leaders.
 8. There is no limitation on persons who are eligible recipients of scholarships. Scholarships will be given without regard to race, creed, religion, nation origin, sex, or employment status of prospective recipients or of any relative of any prospective recipient.
 9. **Notices will be sent to applicants who are selected to receive a scholarship. Applicants may call the Foundation office after May 1, 2008 to inquire about the status of their application at (402) 476-2951 in Lincoln or 1-800-377-3985.**
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**INDEPENDENT INSURANCE AGENTS OF NEBRASKA FOUNDATION
SCHOLARSHIP PROGRAM**

Application for Chet Linder Memorial Scholarship

This application must be postmarked by **March 1, 2009** and mailed to:

Selection Committee
Independent Insurance Agents of Nebraska Foundation
8231 Northwoods Dr., Ste B
Lincoln, NE 68505.

PLEASE PRINT THE FOLLOWING INFORMATION IN APPLICANT'S HANDWRITING:

Section I. Information to be supplied by applicant:

Student's Full Name: _____

Date of Birth: _____ Soc. Sec. No.: _____

Full name of parent(s) or guardian(s): _____

Permanent address of parent(s) or guardian(s) (street or route, town, state, zip): _____

What college do you plan to attend? _____

Date you expect to enter (Month/Year): _____

Please list all other scholarships, awards or financial aids for which you have applied, or have been granted for the coming school years.

Name of Financial Aid	Value	Has it been granted?
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Section II. On a separate sheet of paper, include the following. (This section may be handwritten or typed.)

1. **In a paragraph (no more than one page)**, why do you believe you should be awarded this scholarship?
2. **In a paragraph (no more than one page)**, what will be your major area of college study and what are your educational plans/career goals?
3. Using a separate sheet, attach a resume of your high school career. Please limit to years while in high school. Areas to possibly include, **but not limited to**, are:
 - School organizations/memberships and offices held.
 - Athletic involvement: number of years for each and honors earned.
 - School Volunteer Opportunities.
 - Community involvement opportunities.
 - Employment history, if applicable.

The applicant herewith consents that the Scholarship Selection Committee be fully informed as to the applicant's scholastic standing and other factors having a bearing on this application. If the applicant is chosen as a scholarship winner, the applicant agrees to provide the Selection Committee with evidence of being enrolled as a college sophomore and an official college transcript after his/her first full year of college.

Signature of Applicant

After you have completed your part of this application, present this to your school counselor or principal for certification and delivery to the scholarship selection committee.

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Section III. Information to be supplied by Principal or Counselor

1. This is to certify that the above applicant ranks _____ in a class of _____ seniors.
2. Date of high school graduation will be _____, 2009.
3. The applicant has taken the following college entrance examinations under a statewide testing program: (Please note if ACT or other test was taken more than once, you may list the highest only or list in chronological order from previous to present.)

Name of Test

Score(s)

_____	_____
_____	_____
_____	_____
_____	_____

CONTINUED

4. The Committee would appreciate a brief statement/letter concerning your evaluation of this applicant's citizenship and worthiness for scholarship consideration. (Use a separate sheet for statement.)

Date: _____

Principal or Counselor

Name of High School: _____

Mailing Address: _____

APPLICATION MUST BE POSTMARKED BY MARCH 1, 2009 TO:

Selection Committee
Independent Insurance Agents of Nebraska Foundation
8231 Northwoods Dr, Ste B
Lincoln, NE 68505

Questions? Call the Foundation Office at (402) 476-2951 in Lincoln or 1-800-377-3985.
