

National Wild Turkey Federation Academic Scholarship Program

Application Form

PLEASE TYPE OR PRINT IN INK:

Date: _____

Name: _____ Date of Birth: _____

Home Address: _____ E-mail: _____

City: _____ State: _____ Zip: _____

Social Security No.: _____ Telephone No.: _____

High School: _____ Graduation Date: _____

College Preference: _____

Major Course of Study: _____

List membership in school related organizations (e.g. National Honor Society, FFA, Science Club,
Ecology Club, Student Council, etc.) _____

List elected or appointed leadership positions held in High School: _____

List activities that demonstrate community involvement (e.g. Scouting, 4-H, Civic Group or Club,
Church, or Volunteer Work, etc.) _____

List job experience (e.g. after school, weekends, summer, etc.) _____

List awards received for school or community involvement: _____

How did you learn about the NWTF's Academic Scholarship Program? _____

PLEASE INCLUDE THE FOLLOWING MATERIALS WITH YOUR APPLICATION:

TRANSCRIPT: Official, sealed transcript.

LETTERS OF REFERENCE: Three letters of reference from teachers, counselors, community leaders, clergy, mentors, etc. (**DO NOT** include relatives)

COPY OF CURRENT TEXAS HUNTING LICENSE: (Copy portion of Texas License that shows name, address, etc.)

PHOTO: Minimum wallet size, suitable for publication.

AUTOBIOGRAPHY: Write a brief autobiographical essay explaining why you would be a good investment if you were awarded this scholarship. Include any life experiences demonstrating your dedication to conservation. Essay must be typewritten, double-spaced, not to exceed 3 pages.

HUNTING ESSAY: Write a brief essay describing one of your most memorable hunting experiences with a friend or family member demonstrating your knowledge of hunting. Essay must be typewritten, double-spaced, not to exceed 3 pages.

NOTE:

1. You may attach additional sheets to your application where adequate space is not provided.
2. School Guidance Counselor or Principal **MUST** sign application in the space provided below.

Printed Name: _____ Signature: _____
(School Guidance Counselor or Principal)

Submit application and other materials no later than January 1 to:

(Houston NWTF Chapter Scholarship Committee Chairman)

Name: Norm Wade E-mail: lastofmochians@yahoo.com

Mailing Address: 4902 Connorvale Rd

City: Houston State: Texas Zip: 77039

Chapter: Houston Chapter NWTF