## **ADKISSON**

Keli Christine Adkisson



# Memorial Scholarship

for

## **Building Trades**

Including
Construction Related Degrees

#### **Q**UALIFICATIONS

The recipient must be a senior at Tuscola High School.

The scholarship recipient is eligible to compete for additional scholarships as long as one is a FULL-TIME STUDENT and has a B average or equivalent on a point system.

An application, transcript (official high school or college) or letters of recommendation (2 professional and one personal) MUST BE COMPLETED AND RECEIVED BY MAY 1<sup>ST</sup> of the year one is applying for the scholarship.

The KELI ADKISSON MEMORIAL SCHOLARSHIP does not discriminate on the basis of race, color, religion, sex, age, national origin or disability.

The Scholarship will be warded at the sole discretion of the Scholarship Committee.

SEND COMPLETED APPLICATION, OFFICIAL TRANSCRIPT(S), AND LETTERS OF RECOMMENDATION TO:

### Keli Adkisson Memorial Scholarship

200 N. Parke St. Tuscola, IL 61953

Endowed: 05/01/2021

Name:			
(Last)	(First)		(Middle)
Home Address			
	(Street)		
(City)	(State)		(Zip Code)
Phone Number: ( )	S.S. #		
Relationship with Sponsor (Friend	, Relative, etc.)		
Sponsor Affiliated with:			_ Lodge #
	ACADEMIC P	ΡΕΡΛΩΛ'	TION
			non
	SECTI	ON A	
High School attending:			
Address:			
ACT Score:	SAT Sco	ore:	
CLASS RANK (number)	OUT	OF (class	size)
GRADE POINT AVERAGE: (number	er)		(maximum)
Academic Honors:			
Offices Appointed/Elected to:			
		Year	To
		Year	То
		Year	To:
		Year	То
Extracurricular school related inter	rests and activitie	es:	

PLEASE SEND AN OFFICIAL COPY OF YOUR HIGH SCHOOL TRANSCRIPT, A COPY OF YOUR ACT/SAT SCORE, TWO LETTERS OF RECOMMENDATION FROM TEACHERS AND A PERSONAL RECOMMENDATION BY MAY 1

#### **SECTION B**

College Attending:	
Major Field of Study:	
Minor Field of Study:	
Academic Status: (check one) [ ] Freshman [	] Sophomore [ ] Junior [ ] Senior
Academic Honors:	
Offices Appointed/Elected to:	
	YearTo
	YearTo
	YearTo
	YearTo
GRADE POINT AVERAGE: (number)	OUT OF (maximum)

PLEASE SEND AN OFFICIAL COPY OF YOUR COLLEGE TRANSCRIPT, TWO REFERENCES FROM PROFESSORS AND A PERSONAL RECOMMENDATION BY MAY 1.

	ive about why you have chosen to enter this career field.	<b>M</b> edical respective form
<u> </u>		
<u></u>		
		***********
	•	
	· · · · · · · · · · · · · · · · · · ·	
	·	
<del></del>		
References: Please su about your academic	bmit three references. Two references must be either professors knowledgeak studies, or high school teachers, depending upon your present academic states.	ole :us.
I authorize the schoo Scholarship Commit situation and aide.	I in which I am enrolled in academic year / to disclose to the ee of the Masonic Scholarship any and all matters pertaining to my financial	
Date:	Signature:	
Dale.	JIKIIACUIC.	