

2024 **WVMLA George Trader Memorial Scholarship**  
Scholarship Application (Due April 15, 2024)

**Applicant Information**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**WVMLA Sponsor Information (sponsor must be a current (paid to date) member)**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**School Attending Information**

Name of High School \_\_\_\_\_

City, State \_\_\_\_\_ Year Graduated \_\_\_\_\_

**Future School Information**

Name of Institution \_\_\_\_\_

Circle One Graduate school 4 year college/university 2 year college Vocational/trade school

City, State \_\_\_\_\_ Expected Graduation Year \_\_\_\_\_

Major \_\_\_\_\_ Hours completed if any \_\_\_\_\_

**This application requires that you answer the following 2 questions one essay. Please type your essay responses.**

*Question #1 - List any contributions you and/or your sponsor have made to the WVMLA or to your local club*

*Question #2 - Please describe the benefits of belonging to an association or club such as the WVMLA*

By signing below, we certify that the above information is accurate to the best of our knowledge. False information will result in revocation of the scholarship.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Sponsor Signature \_\_\_\_\_ Date \_\_\_\_\_

The scholarship of \$500.00 will be paid directly to the student when proof of enrollment is sent to the president for review. All blanks on this application must be filled in for the application to be considered. Any blanks or omitted essays will make the application invalid. Please send application and essay by April 15th to: **Shannon Lewis, 1085 Bailey Ridge Road Buckhannon, WV 26201**