



Black River Falls Area Foundation Jackson County Schools 2026 Alumni Scholarship Application

Completing one application allows you to apply for more than one scholarship. Indicate which scholarship(s) you wish to apply for~ are qualified for~ by checking the box in the far left column.

Be sure to include all the required documentation including a completed application, transcripts, letters of recommendation, any required essays, and a head shot photo; ALL of which should be sent to: scholarships@brfareafoundation.org

All completed applications are due by February 28, 2026

Download the application and save a copy to your files.

Read the directions carefully and complete the application in its entirety. You will need to save again after filling it in.

<u>Scholarship</u>	<u>High School Requirement</u>	<u>Specific Requirement</u>	<u>Notes</u>
<input type="checkbox"/> Alice Homstad Memorial	BRF	2 Completed Semesters of Post-Secondary	AP Course Credits may help to fulfill the two post-secondary semester requirements
<input type="checkbox"/> BRF Alumni Association	BRF	2 Completed Semesters of Post-Secondary	
<input type="checkbox"/> David & Marilyn Hoffman	BRF		
<input type="checkbox"/> Foundation Annual Alumni	BRF		
<input type="checkbox"/> Gerald & Nancy Laabs	BRF	Must be Attending UW Madison	
<input type="checkbox"/> Ken Graff Memorial	BRF	Preference Given to Non-Traditional Student and/or Accounting	
<input type="checkbox"/> Peter & Jone Hoffman	BRF		
<input type="checkbox"/> Rose Klir Memorial	BRF	Education	
<input type="checkbox"/> Tim & Kay Finch Alumni	BRF		
<input type="checkbox"/> Rick Millis Memorial	BRF or Lincoln	Additional Essay Required	
<input type="checkbox"/> Leland & Jeanette Larson Memorial	2026 Lincoln	Rotates between Jackson County Schools	
<input type="checkbox"/> Ann Krohn Peterson	Jackson County	Education	
<input type="checkbox"/> Dean Nortman Memorial	Jackson County	EMT or Fire Science Related Fields	
<input type="checkbox"/> Finch Family Agricultural	Jackson County	2 or 4 Year Accredited School studying Ag	
<input type="checkbox"/> Krohn Clinic Physicians	Jackson County	Medicine (Preferably Rural)	
<input type="checkbox"/> Richard Hilliker	Jackson County	Natural Resources-Conservation-Environment	
<input type="checkbox"/> SFB Foundation Alumni	Jackson County	Finance, IT, or Agriculture	
<input type="checkbox"/> Technical Impact	Jackson County	Must be attending a WI Technical School	

STUDENT INFORMATION

Current School

Print Name

High School Attended

Graduation Year

Home Address:

Street

City

State and Zip

Phone #

email address

Date of Birth

***Required**

Parent/Guardian Name * email address * Phone # *

[illegible]

Parent/Guardian Name	email address	Phone #
----------------------	---------------	---------

Mailing Address:	Street	City	State and Zip
------------------	--------	------	---------------

of Family Members * _____ # of Family Members Attending College Next Year * _____

School you are Currently Attending?

School you will be attending in the fall?

CURRENT year in post-secondary school?

Intended Major(s) - Minor(s)?

Career plan upon graduation?

HIGHLIGHTS

AWARDS & HONORS: Please list any awards and honors received during your college career indicating context of award. Ex: athletic, academic, music, etc.

EXTRA-CURRICULAR ACTIVITIES: Please list any extra-curricular activities involved in (sports, newspaper editor, etc.).

YEAR

[illegible]

Please describe any volunteer work you have participated in during your post-secondary education.

[illegible]

Are you currently employed? If so, where?

How many hours do you average per week?

Please list any other work experience you have had. Include the employer and the dates of employment.

[illegible]

In the event you need to attach more than one document to your submission email, please title these documents with your name and 'Application'.

VERIFICATION (Required)

You must include an unofficial school transcript which includes the most recent semester, if applicable. Email the transcript, together with the application and all other required documentation, to scholarships@brfareafoundation.org. In the event you need to attach more than one document to your submission email, please title this document with your name and 'Verification'.

If you have not attended a post-secondary institution since graduation, please tell us that and include your final High School GPA and course listing.

LETTERS OF RECOMMENDATION (Required)

You must share two letters of recommendation. At least one of them must be from a post-secondary instructor or advisor (if applicable). Email the LORs, together with the application and all other required documentation, to scholarships@brfareafoundation.org. In the event you need to attach more than one document to your submission email, please title these documents with your name and 'LOR1' and 'LOR2'.

If your letters are coming DIRECTLY from the author, please have them emailed to scholarships@brfareafoundation.org. Please ask the sender to name the document with your name and 'LOR' and to do the same in the email subject line. *DO NOT assume that I have received LORs that have been sent directly. I will send a confirmation email to you upon receipt of a LOR on your behalf.*

ESSAY (Required)

On a separate sheet, please write a short essay of approximately 300 to 400 words telling us about yourself while addressing the following topics in no particular order.

- * Describe what makes you a deserving candidate for a Foundation Scholarship.
- * Tell us about your immediate and long-term goals for both your education and your career.
- * Provide an example of how you have demonstrated perseverance and leadership.
- * Share with us how you have financed your education thus far and what your plans are moving forward.

In the event you need to attach more than one document to your submission email, please title this documents with your name and 'ESSAY'.

MILLIS ESSAY (Required to qualify for Rick Millis Memorial Scholarship)

Please write a second short essay of up to 250 words telling us:

About the life experience that as had the most impact on your educational goals and objectives AND your need for financial assistance.

In the event you need to attach more than one document to your submission email, please title this documents with your name and 'ESSAY'.

Publication Permission & School Status Changes

I hereby grant the Black River Falls Area Foundation permission to use my name, picture, school, and career plans, in their presentation materials and on their website.

In addition, I agree that I will keep the Foundation office apprised (preferably by email) of any changes in my educational status between the date of this application and August 1, 2023. I further understand attending a different school, not being a full-time student, or failing to notify the Foundation office of changes in a timely manner, may reduce or negate my scholarship award.

Signature

Date

Make Certain you have INCLUDED all of the following:

- | | |
|--------------------------|--------------------------------------------------|
| <input type="checkbox"/> | Completed Application SIGNED and DATED on page 5 |
| <input type="checkbox"/> | Unofficial Transcripts |
| <input type="checkbox"/> | 2 Letters of Recommendation |
| <input type="checkbox"/> | Essay |
| <input type="checkbox"/> | Millis Essay (if applicable) |