



# NEBRASKA AIRBOATERS ASSOCIATION SCHOLARSHIP

TODAY'S DATE: \_\_\_\_\_

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

PARENT'S NAMES \_\_\_\_\_

CLASS SIZE \_\_\_\_\_ GRADE POINT AVERAGE \_\_\_\_\_

SCHOOL \_\_\_\_\_

ADDRESS \_\_\_\_\_

INTENDED AREA OF STUDY \_\_\_\_\_

SCHOOL PREFERENCE \_\_\_\_\_

SCHOOL ORGANIZATIONS \_\_\_\_\_

\_\_\_\_\_

OFFICES (ORGANIZATIONS, POSITION, AND YEARS HELD) \_\_\_\_\_

\_\_\_\_\_

CHURCH OR COMMUNITY (GROUP AND YEARS PARTICIPATION) \_\_\_\_\_

\_\_\_\_\_

HONORS, AWARDS, SCHOLARSHIPS (ACADEMIC OR SERVICE) \_\_\_\_\_

\_\_\_\_\_

DISTRICT OR STATE COMPETITION (NAME AND PLACE) \_\_\_\_\_

\_\_\_\_\_

WORK EXPERIENCE \_\_\_\_\_

\_\_\_\_\_

PERSON WHO IS NAA MEMBER \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

\*\*\*( PLEASE ATTACH A PARAGRAPH )

— YOUR CAREER GOALS

— WHAT AIRBOATING MEANS TO ME

— One letter of personal recommendation. Recommendations may be written by a school counselor teachers/instructors, youth or volunteer group leaders, employers, or any person who can provide a brief statement on your behalf.

**Send completed application to:**  
Nebraska Airboaters Association  
P.O. Box 111  
Columbus, NE 68602

**For more information contact:**  
Kirk Westring  
P.O. Box 458 Humphrey, NE 68642  
kirk.westring@gmail.com  
402-910-4424