



P.O. Box 1104  
Hastings, Nebraska 68902

## Leadership Hastings Scholarship Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Tele #: \_\_\_\_\_ Work #: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

Do you have a sponsoring organization (usually your employer) that will pay part of your tuition (y/n):

\_\_\_\_\_

If yes, how much of the tuition will be paid on your behalf?

\_\_\_\_\_

\_\_\_\_\_

Please describe how paying the full tuition may cause a hardship for you or your sponsor:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If selected for Leadership Hastings and you do not receive a scholarship, will you withdraw from the program?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_