### CHARLES WILLIAM SCHLUCKEBIER MEMORIAL SCHOLARSHIP

In memory of Bill Schluckebier
Provided through the
Hillsboro Educational Foundation, Inc.
2024

This \$500 scholarship is awarded annually through the Hillsboro Educational Foundation by members of the William C. Schluckebier family. Bill Schluckebier was a prominent member of our community and represented one of the several generations of Schluckebiers to have farmed this area. Mr. Schluckebier served our school district for many years as a board member from the Donnellson area.

#### **CRITERIA**

- Graduating senior who is planning to pursue training in an agricultural related career or diesel mechanics.
- Consideration will be given to the following as a whole (not limited by one);
  - o Academic Achievement (GPA, ACT/SAT, Curriculum);
  - o Financial need (Family size, income, costs, unusual circumstances)
  - Future plans (Choice of school, major concentration, plans after completion)

#### **AWARD**

- This scholarship will be announced at the Hillsboro High School Honors night.
- One \$500.00 will be awarded annually
- A letter of acceptance from the recipient's college of choice will be required.

Return to Mrs. Cearlock in the HS Counseling Office.

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<u>Only completed applications will be considered</u>. A completed application includes answering the questions below and telling us about yourself.

Name of Applicant:			
Permanent Address:			
Permanent Telephone:			
Parent's Name:			
Dad's Place of Employment:			
Mom's Place of Employment:			
# of Siblings: # of Siblings in College/Trade School:			
indicate school(s):			
Adjusted gross income from last year			
Any unusual demands on family income?			

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List other financial aid that you will receive (scholarships, grants, etc.):		
High School G.P.A.	High School Rank	SAT / ACT Score
At which university/scho	ol will you be attending:	
	_	
What area of study:		
	to briefly explain your mot eer or study diesel mechanic	tivations to pursue an es (feel free to use a separate
Signature of Student:		Date:
Signature of Parent/Gua	rdian:	Date: