# Walworth County Human Resource Association Scholarship Application Process

The Walworth County Human Resource Association will offer two scholarships annually. Payment will be distributed to the student upon confirmation of enrollment the following fall semester.

Applications will be accepted until May 12, 2025, for scholarships to be distributed for the following fall term. The WCHRA Board of Directors will review all applications and select recipients based on the following criteria:

- Timely submission of the completed application materials <u>along with a copy of</u> <u>student's current transcript & current course</u> schedule by the deadline date of May 12, 2025. GPA will be considered in the event of a tie in the selection process.
- 2. The student must be actively pursuing a major or minor in human resources, supervisory management, or a related discipline focusing on human resources management. Students must have graduated from a Walworth County High School.
- 3. One scholarship in the amount of \$1000 will be awarded to a student who is currently attending a four-year institution and will be entering their sophomore, junior, or senior year in a human resource related program.
- 4. One scholarship in the amount of \$500 will be awarded to a student who is at least halfway through a human resources generalist certificate program or who will be entering the third semester in a supervisory management or human resources-related associate degree program at a two-year institution.

Questions regarding the application process can be directed to Kris Welsh, Scholarship Chair, at kris.welsh@completestaff.net

Please return completed application to: Kris Welsh, Scholarship Chair, by email at kris.welsh@completestaff.net or mail completed application to:

WCHRA

Attn: Scholarship Committee

P.O. Box 261

Elkhorn, WI 53121

PLEASE NOTE: WCHRA reserves the right to withdraw or change the amount of any scholarship award based on lack of scholarship funding, misrepresentation of information by the applicant or withdrawal from the education institution by the designated applicant(s), or for any other reason at any time with or without notice as may be necessary. Proof of enrollment must be provided before any scholarship award will be paid. Scholarship awards will be paid directly to the applicant's educational institution for the purpose of tuition.

# Walworth County Human Resource Association

### Scholarship Application Addendum

#### PLEASE PRINT OR TYPE.

Applicant Name			
Last Name	First N	Name	Middle Initial
Address_			
Street or P.O. Box	City	State	Zip Code
Please answer the following questions to the best	of your ability.	Attach a separate sheet if no	ecessary.
Please state the reasons why you decided to continuous contin	nue with your educ	cation in the Human Resource	es field.
<ol> <li>Please describe what you believe is the key role o organization.</li> </ol>	f today's human re	esources professionals within	their
3. What do you believe are the top two (2) challenge:	s facing the huma	n resources profession in the	future?
<ol> <li>If you had to specialize in one functional area of he (i.e., recruitment/retention, organizational/employee d</li> </ol>			why?

# Walworth County Human Resource Association

# Scholarship Application Form

Applicant Name				
Last Name		First Nam	ne	Middle Initial
AddressStreet or P.O. Box		C'h.	C4	ata Zin Cada
Street or P.O. Box		City	St	ate Zip Code
Home Phone No		Date of Birth_		
Include Area Code				
High school you graduated from			Year	
College you are attending			College GPA_	
Major Subject Area (College)				
Minor Subject Area (College-if applic	able)			
Anticipated College Graduation Date		Residence: 🗆	Dorm ☐ Off-campus ☐ Comm	ıuter
Please indicate your approximate total	al family or total hou	sehold income:		
□ \$10,000-\$25,000	□ \$25,000-\$50,000			
	□ \$75,000-\$100,000	0 □ Over	r \$100,000	
Have you applied for financial aid thr	ough your institution	? □ Yes	□ No	
Total amount of your financial aid aw	arded for the 2025-2	2026 school year	?_\$ Include ALL sources	
Tatal and and after an advantage and	the 0005 0000			
Total amount of your education expe	nses the 2025-2026	school year?	\$ Include tuition, books, room & bo	ard
Place of Employment				
		Phone	No.	
Street Address	City State	Zip Code	Include Area Code	
Avg. No. of Hours per Week	Supervisor's Name			
Please list any extra-curricular activit specific groups you are associated w			non-competitive sports, h	obbies, or
specific groups you are associated w	•	et if necessary).	Honors/Letters	Received
Activity	Parti	icipation	or Office(s) Held	d

Please describe any <b>community service</b> activities in which you have participated. (attach a separate sheet if necessary):				
Please describe your career goals over the next 3-5 years in t	he human resources field.			
	_			
Please discuss any other information you would like us to be a scholarship.	aware of that is relevant to your application for			
	_			
I certify that the above information is true & correct to the best of my knowledge. I fully understand that any misrepresentation of this information may jeopardize my receipt of any scholarship funds to be awarded as well as any funds already disbursed to me.				
Signature of Applicant	Date of Application			
oignature of Applicant	Date of Application			
For WCHRA Use only				
Date Application ProcessedDate	ee of Approval			
Reviewed By				
Amount of AwardDar	e of Award			