

**Sowers Club of Nebraska Foundation**  
**Galloway Scholarship Application**

1701 S. 17<sup>th</sup> Street, Suite 1H  
Lincoln, NE 68502

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Mailing Street Address: \_\_\_\_\_

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

County of Residence: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Are you a U.S. Citizen? \_\_\_\_\_

Do you have a parent employed with Burlington Northern Railroad? Yes \_\_\_\_\_ No \_\_\_\_\_

Which institution do you plan on attending? \_\_\_\_\_

Major Course of Study: \_\_\_\_\_

High School GPA: \_\_\_\_\_ SAT Score: \_\_\_\_\_

Extra-Curricular Activities in which you have participated (high school, community, other): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Awards and Acknowledgements in which you have received: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

How do you plan to pay for your education? \_\_\_\_\_

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What are your aspirations? \_\_\_\_\_

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I certify that the statements made on this application are correct and complete to the best of my knowledge. I authorize the Sowers Club of Nebraska Foundation to release any information which may be required to determine my eligibility to receive scholarship assistance.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date