

**JAMES M. COX FOUNDATION SCHOLARSHIP APPLICATION  
FOR SCHOOL YEAR 2015-2016 – AMOUNT \$1,000.00**

Steve Otto, Co-President  
Jim Otto, Co-President

Ronald C. Jensen, Secretary

Patrick A. Grewe, Treasurer

**QUESTIONS: Contact Warren Odgers at (402) 434-1103,  
US Bank, 233 S. 13<sup>th</sup> Street, Suite 1011, OM-NE-LT10, Lincoln, NE 68508**

**Please Type or Print Legibly:**

APPLICANT (FULL GIVEN NAME) \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ TELEPHONE \_\_\_\_\_

County \_\_\_\_\_ Guidance Counselor Name \_\_\_\_\_

GUIDANCE COUNSELOR TELEPHONE \_\_\_\_\_ GUIDANCE COUNSELOR EMAIL \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FATHER'S NAME (Indicate if deceased) \_\_\_\_\_

FATHER'S ADDRESS \_\_\_\_\_

FATHER'S EMPLOYER AND JOB TITLE \_\_\_\_\_

MOTHER'S NAME (Indicate if deceased) \_\_\_\_\_

MOTHER'S ADDRESS \_\_\_\_\_

MOTHER'S EMPLOYER AND JOB TITLE \_\_\_\_\_

TOTAL NO. OF CHILDREN CLAIMED AS DEPENDENTS ON PARENT TAX RETURN(S) \_\_\_\_\_

NAME(S) WHO WERE IN COLLEGE FOR 2012-13, 2013-14, 2014-15 OR WILL BE FOR 2015-16 SCHOOL YEAR:  
(use back of sheet if necessary):

CHILD'S NAME/COLLEGE \_\_\_\_\_ CHILD'S NAME/COLLEGE \_\_\_\_\_ CHILD'S NAME/COLLEGE \_\_\_\_\_

NAME OF UNIVERSITY, COLLEGE, OR TRADE SCHOOL YOU WILL BE ATTENDING:

INTENDED DEGREE \_\_\_\_\_ PERIOD OF STUDY \_\_\_\_\_

HAVE YOU BEEN ACCEPTED FOR ADMISSION? YES \_\_\_\_\_ NO \_\_\_\_\_

(if no, explain) \_\_\_\_\_

IN BLACK INK, SHADE THE COUNTY IN WHICH YOUR HIGH SCHOOL IS LOCATED;



**APPLICANT'S SIGNATURE:**

All of the information herein supplied is true and accurate to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_ 2015.

**APPLICATION REQUIREMENTS: IN ORDER TO BE CONSIDERED FOR A SCHOLARSHIP AWARD, YOU MUST:**

1. COMPLETE AND SIGN THIS APPLICATION. THE FOLLOWING MUST ACCOMPANY THIS SIGNED APPLICATION;
2. ATTACH A COPY OF YOUR STUDENT AID REPORT ("SAR") AS ISSUED BY THE FEDERAL FAFSA PROGRAM;  
**YOU MUST INCLUDE THE FAFSA FAMILY INCOME DATA!**
3. ATTACH A CERTIFIED COPY OF YOUR HIGH SCHOOL TRANSCRIPT, AND TWO LETTERS OF RECOMMENDATION FROM INSTRUCTORS, ADVISORS OR COUNSELORS;
4. PREPARE AND ATTACH AN EDUCATIONAL COMMITMENT ESSAY OF NO MORE THAN 1 PAGE RELATING TO THE IMPACT OF A HIGHER EDUCATION ON YOUR PERMANENT CAREER OBJECTIVES; AND
5. MAIL ALL ITEMS AND THIS APPLICATION, WITH POSTMARK ON OR **BEFORE April 15, 2015**, TO:  
STEVE OTTO, JAMES M. COX FOUNDATION, 1500 KINGSTON ROAD, LINCOLN, NE 68506.  
**Applications by e-mail are NOT accepted!**