

**THE NETTIE LOKEY WILEY  
AND CHARLES L. WILEY FOUNDATION**

P. O. Box 126  
Irvington, VA 22480  
[www.wileyfdn.org](http://www.wileyfdn.org)

**SCHOLARSHIP APPLICATION  
for Financially Independent Student**

**RECEIPT DEADLINE: MARCH 31**

**Note:** Preference is given to Lancaster and Northumberland County residents.  
Preference is given to applicants attending in-state, public colleges or universities.  
Incomplete or untimely applications will not be considered.

**TO BE COMPLETED BY SCHOLARSHIP APPLICANT**

1. Have you been awarded a scholarship by The Wiley Foundation previously?  Yes  No
2. Student's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_
3. Mailing Address \_\_\_\_\_
4. Physical Address (if different) \_\_\_\_\_
5. Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_
6. Date of Birth \_\_\_\_\_
7. Present Employment and Position \_\_\_\_\_
8. High School \_\_\_\_\_ Year of Graduation \_\_\_\_\_
9. Name of college you currently attend or plan to attend \_\_\_\_\_
10. Anticipated completion date (month/year) \_\_\_\_\_ College Cumulative GPA \_\_\_\_\_
11. What degree (Certificate, Associates, Bachelor's, Masters, Other) are you pursuing or plan to pursue?  
And in what major or concentration?  
\_\_\_\_\_
12. What are your career goals? \_\_\_\_\_  
\_\_\_\_\_
13. Please check: Are you a part-time student  or full-time student  ?
14. Other colleges/universities attended and hours earned (if any)  
\_\_\_\_\_

15. Total anticipated expenses for the entire academic year: \$ \_\_\_\_\_

Breakdown: Tuition \_\_\_\_\_, Room \_\_\_\_\_, Food \_\_\_\_\_  
Books \_\_\_\_\_, Other \_\_\_\_\_, Other \_\_\_\_\_

16. Foundations or organizations (including college/university) to which you have applied for financial aid and amount granted: \_\_\_\_\_  
\_\_\_\_\_

17. Attach a typed, concise essay detailing **why financial assistance is needed** and **how your goals align with the goals of the foundation**. If a returning applicant, please also share last year's academic experience.

18. Upon completion of your degree requirements, do you plan (check those that apply):

\_\_\_ To teach on an elementary level     \_\_\_ To teach in Lancaster or Northumberland

\_\_\_ To teach in Virginia                     \_\_\_ To work with young children as a \_\_\_\_\_

\_\_\_ To work as a nurse or other health professional in Lancaster or Northumberland

\_\_\_ To reside in the Northern Neck or Middle Peninsula

19. How did you learn about The Wiley Foundation? \_\_\_ High School Guidance Counselor

\_\_\_ Website \_\_\_ Family/Friend \_\_\_ Previous Scholarship Recipient \_\_\_ Other: \_\_\_\_\_

**I HAVE ATTACHED THE FOLLOWING TO MY SIGNED APPLICATION:**

- High school transcript or current college transcript (unofficial transcripts accepted)
- Two letters of recommendation -  
At least one from a guidance counselor, faculty member or principal  
*If a returning applicant, only one letter of recommendation is required.*
- Listing of academic honors
- Listing of extracurricular and community service activities, including work experience
- Essay as outlined above
- Any other information that might be helpful to the Foundation

My signature below indicates that to the best of my knowledge this application is complete, honestly presented and factually correct. I understand that this application is for this year only. To qualify for subsequent consideration, I must submit a new application in accordance with the guidelines.

Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_