



**Personal Information**

Full Name: \_\_\_\_\_  
*Last First M.I.*

Parents Name: \_\_\_\_\_  
*Last First*  
*Applicants must be a child or legal ward of a NuWave Technology internet customer*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email \_\_\_\_\_

**School Information**

School Name: \_\_\_\_\_ Year \_\_\_\_\_  
Area of Interest \_\_\_\_\_ College of choice \_\_\_\_\_

**Send submissions to:**

**Submissions should include:** *contact form and 2-page essay.*

**Email:** [donb@nuwavetechinc.com](mailto:donb@nuwavetechinc.com) with the subject: Scholarship

**Mail:**

NuWave Technology, Inc.  
3259 St Rt 219  
Coldwater, Ohio 45828

**NuWave Technology use only**

Notes: \_\_\_\_\_  
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