



**WET WALNUT CREEK WATERSHED JOINT DISTRICT #58 SCHOLARSHIP  
AND  
STATE ASSOCIATION OF KANSAS WATERSHED SCHOLARSHIP**

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Parent (s) \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email \_\_\_\_\_

Class Rank \_\_\_\_\_ No. in Class \_\_\_\_\_ Grade Point Average \_\_\_\_\_  
(7 Semesters)

High school you attend \_\_\_\_\_

List of scholastic honors you have received

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List your activities in school

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List your activities out of school

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List positions of leadership in and out of school

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Last paid employment you have had (including employer and nature of work)

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\_\_\_\_\_

\_\_\_\_\_

College or school you plan to attend \_\_\_\_\_

College major or area of training \_\_\_\_\_

Please describe your vocational or professional plans for the future in 300 words or less.  
(Use another page if necessary and attach to application)

List any other pertinent information

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\_\_\_\_\_

\_\_\_\_\_

I hereby confirm that all information provided on this application is correct, and I understand that any false information automatically disqualifies me from eligibility.

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(Signature of Applicant)

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(Date)

RETURN TO: WET WALNUT CREEK WATERSHED  
PO BOX 207  
300 WEST HWY 4  
LACROSSE KS 67548

OR EMAIL TO: [kcorsair@gbta.net](mailto:kcorsair@gbta.net)

BY: FEBRUARY 11, 2026

A LETTER OF RECOMMENDATION FROM YOUR SCHOOL COUNSELOR WOULD BE BENEFICIAL