

 **PIONEER**
COMMUNICATIONS
Joseph B. Chilen and Earl B. Williams
Memorial Scholarship Application

Date: _____

Name: _____

Address: _____

City, State and ZIP: _____

Phone number: _____

Parent(s) or Guardian(s)*: _____

Parent(s) places of employment: _____

Names and ages of siblings: _____

Names of siblings currently attending college: _____

Name and address of secondary education institution you plan to attend:

Name of institution: _____

Address: _____

City, State and ZIP: _____

Major field of study (if known): _____

Please attach the following:

- (1) A resume outlining activities in which you have participated while in school, accomplishments and honors you have received, and your employment experience;
- (2) A short paragraph describing your future plans; and
- (3) A copy of your high school transcript.

Completed applications should be submitted and delivered via postal mail or express delivery service, electronic mail or fax no later than **February 20, 2015**:

Mail: **Pioneer Telephone Association, Inc.**
Scholarship Committee
P.O. Box 707
Ulysses, Kansas 67880

E-mail: **tim.nemechek@pioncomm.net**

Fax: **(620) 424-3131**

* Student's parent or guardian must be a Pioneer Communications telephone, cable television or Internet customer.