



# PETER FRIEDRICH Memorial Scholarship

## Special Requirements:

The following selection criteria shall be utilized when reviewing applications and selecting recipients:

- Must be a resident of Portage County
- Must be accepted into a post-secondary educational institution
- Provide documentation of Physical / Learning Disability
- Submit an essay (or audio tape) explaining your aspirations and goals for the future, and describing a situation where your spirit and perseverance helped you overcome your disability
- If you are a non-traditional student applying you may disregard submitting the Transcript and Student Resume listed on the general application.
- ONLY **ONE Original** and **ONE additional Copy** of the original materials, in same order, stapled as an individual packet is needed for this scholarship.  
*(Please disregard the application instructions asking for 5 copies for this particular scholarship)*

Financial need may also be considered:

- Include a brief summary explaining what "Financial Need" means to you and your situation.
- You will need to apply for the **Free Application for Federal Student Aid (FAFSA)**. This can be obtained by visiting [www.fafsa.gov](http://www.fafsa.gov) for more information.  
Once completed, you will receive both an **Expected Family Contribution (EFC)** code and also a **Student Aid Report (SAR)**. Please keep these for your records.
- You must indicate your **EFC** from your FAFSA here to be considered: \_\_\_\_\_

I hereby agree to all the above criteria and I certify that all information for this scholarship application is true to the best of my knowledge. I understand that all decisions are final and not subject to review or appeal. I further understand that any information provided in this and other application forms may be shared with committee members of the sponsoring scholarship.

**Student Signature:** \_\_\_\_\_

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

**Parent Signature:** (if under 18 years of age) \_\_\_\_\_

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

*Application Materials should be directed to:*

COMMUNITY FOUNDATION OF CENTRAL WISCONSIN  
1501 CLARK STREET, STEVENS POINT, WI 54481  
PHONE: 715.342.4454 EMAIL: [foundation@cfcwi.org](mailto:foundation@cfcwi.org) FAX: 715.342.5560

