

---

# ***Wisconsin Rural Water Association***

## **Water Industry Professionals (WIP) 2026 Scholarship Application**

**DEADLINE DATE IS: March 3, 2026**

### **Official Rules**

Scholarships will be made to a student to defray the cost of tuition, books, or room and board at an accredited institution of higher learning approved by the Wisconsin Rural Water Association (WRWA). The scholarship money will be paid directly to the student at the end of the first semester with proof of attendance. The scholarships will be awarded to dependent children, stepchildren, or grandchildren of eligible WRWA members.

To be eligible for a scholarship, applicants must complete the application form in its entirety by completing all blanks. If item is not applicable, please place an N/A in the blank. Upon completion, return to the **WIP Scholarship Committee, 350 Water Way, Plover, WI 54467** postmarked no later than **March 3, 2026**. All recipients will be first screened on eligibility requirements, with priority given, but not limited to water/wastewater related studies. Applicants will be evaluated on a comparative basis at the sole discretion of the committee.

Decisions will be final. Application material and decisions of the committee shall be confidential. Acceptance of scholarships constitutes permission to use recipients name and/or likeness for purpose of promotion.

**Renee J. Koback**

WRWA Member Services Coordinator

(715) 344-7778

[rkoback@wrwa.org](mailto:rkoback@wrwa.org)

[www.wrwa.org](http://www.wrwa.org)



**WISCONSIN RURAL WATER ASSOCIATION  
WATER INDUSTRY PROFESSIONALS (WIP)  
2026 SCHOLARSHIP APPLICATION**

Please type or print clearly.

**PERSONAL DATA**

NAME \_\_\_\_\_  
(Last) (First) (Middle)  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
E-MAIL \_\_\_\_\_ TELEPHONE \_\_\_\_\_

**ELIGIBLE WRWA MEMBER (PARENT/GUARDIAN/GRANDPARENT)**

NAME \_\_\_\_\_ SYSTEM/FIRM NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
MEMBER TYPE: WIP \_\_\_\_\_ SYSTEM \_\_\_\_\_ CORPORATE/ASSOCIATE \_\_\_\_\_ OTM \_\_\_\_\_  
RELATIONSHIP TO APPLICANT \_\_\_\_\_

**HIGH SCHOOL DATA**

SCHOOL NAME \_\_\_\_\_ GRADUATION DATE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
YOUR CLASS RANK \_\_\_\_\_ NUMBER OF STUDENTS IN CLASS \_\_\_\_\_  
YOUR GRADE POINT AVERAGE \_\_\_\_\_ (Transcript must be submitted with application)

***NOTE: GPA must be in a standard 4.0 scale or based on a grade percentage of 1-100. If your official high school transcript does not include a GPA in one of these formats then a method of conversions must be supplied (weighted GPA scores accepted).***

**COLLEGE/UNIVERSITY DATA**

IS THIS YOUR FIRST YEAR OF HIGHER EDUCATION? YES \_\_\_\_\_ NO \_\_\_\_\_  
COLLEGE GRADE POINT AVERAGE \_\_\_\_\_ (college transcript required)  
SCHOOL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
Please indicate \_\_\_\_\_  
\_\_\_\_\_ 4 YEAR COLLEGE/UNIVERSITY  
\_\_\_\_\_ 2 YEAR COMMUNITY/JUNIOR COLLEGE  
\_\_\_\_\_ VOCATIONAL TECHNICAL SCHOOL

**MAJOR COURSE(S) OF STUDY**

\_\_\_\_\_  
\_\_\_\_\_



### **ESSAY**

ON A SEPARATE PAGE IN 150 WORDS OR LESS, PLEASE PROVIDE A BRIEF ESSAY ON YOUR GOALS AS THEY RELATE TO YOUR EDUCATION, CAREER AND FUTURE PLANS.

### **ACADEMIC ACHIEVEMENTS**

PLEASE LIST ANY ACADEMIC ACHIEVEMENTS OR AWARDS YOU HAVE RECEIVED DURING HIGH SCHOOL OR COLLEGE.

---

---

---

### **OTHER ACHIEVEMENTS**

PLEASE LIST ANY OTHER AWARDS, MEMBERSHIPS, ACCOMPLISHMENTS OR OTHER SPECIAL RECOGNITION YOU HAVE RECEIVED OR ACHIEVED.

---

---

---

### **OTHER SCHOLARSHIPS**

PLEASE LIST ANY OTHER SCHOLARSHIPS YOU'RE CURRENTLY RECEIVING.

NUMBER OF SCHOLARSHIPS \_\_\_\_\_ TOTAL DOLLAR AMOUNT \_\_\_\_\_

### **CERTIFICATION**

IN SUBMITTING THIS APPLICATION, WE CERTIFY THAT THE INFORMATION PROVIDED IS COMPLETE AND ACCURATE TO THE BEST OF OUR KNOWLEDGE. FALSE OR INCOMPLETE INFORMATION WILL RESULT IN DISQUALIFICATION OR THE REVOCATION OF ANY SCHOLARSHIP GRANTED.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

### **Official Rules**

Scholarships will be made to a student to defray the cost of tuition, books, or room and board at an accredited institution of higher learning approved by the Wisconsin Rural Water Association (WRWA). The scholarship money will be paid directly to the student at the end of the first semester with proof of attendance. The scholarships will be awarded to dependent children, stepchildren or grandchildren of eligible WRWA members.

**In order to be eligible for a scholarship, applicants must complete the application form in its entirety by completing all blanks. Applications without the required information will not be considered. If item is not applicable please place an N/A in the blank.** Upon completion, return to the **WIP Scholarship Committee, 350 Water Way, Plover, WI 54467** postmarked no later than **March 3, 2026**. All recipients will be first screened on eligibility requirements, with priority given, but not limited to water/wastewater related studies. Applicants will be evaluated on a comparative basis at the sole discretion of the committee. Decisions will be final. Application material and decisions of the committee shall be confidential. Acceptance of scholarship constitutes permission to use recipients name and/or likeness for purpose of promotion.