



Kosciusko REMC

I would like to apply for the John H. Anglin Memorial Scholarship. I hereby confirm I will be attending a higher-level learning institution during the 2019/2020 school year. I understand my presence at the KREMC annual meeting on April 13 is required in order to claim the scholarship.

Applicant's Signature: _____

Name of applicant: _____

Name of parent or guardian (if applicable): _____

Address: _____

City: _____ Zip: _____

KREMC account number: _____

Phone number: _____

Name of school: _____

Email address: _____

This application must be received by Kosciusko REMC no later than April 1, 2019. Enrollment verification is required to claim the scholarship money. Payment will be sent directly to the institution on the student's behalf.

Mail to: **370 SOUTH 250 EAST
WARSAW, IN 46582**

Email to: **mail@kremc.com**

(800) 790-7362