





# **FALL 2024 K.O. BROADY SCHOLARSHIP APPLICATION**

Thank you for your interest in the University of Nebraska High School K.O. Broady Scholarship Fund. This scholarship fund is intended to financially assist the enrollment of current or prospective students in UNHS courses. It was established in honor of Dr. K.O. Broady, a pioneer in continuing education in Nebraska. The scholarship may provide full or partial payment for tuition and administrative fees.

## Fall 2024

The Fall 2024 application period has been made available with applications accepted August 12 through September 27, 2024. Scholarship recipients will be chosen by October 18, 2024, and all applicants will be contacted once a decision has been made (no later than October 31, 2024).

## **To Apply**

The following application form and three recommendation forms are required as well as official transcripts of all high school work (if applicable). If you have extenuating circumstances of which you would like the committee to be aware, please include those in a cover letter.

If you have questions, please contact UNHS Customer Service.



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### **APPLICATION DIRECTIONS**

1.	Complete all applicable application fields. Be specific in describing your educational objectives and level of
	financial need. Send completed form to:

highschool@nebraska.edu

OR

K.O. Broady Scholarship Committee

University of Nebraska High School

PO Box 880633

Lincoln, NE 68588-0633

- 2. Select three (3) people to complete the Scholarship Recommendation Form in support of your application. These individuals may be teachers, employers, principals, advisers, counselors or others. Please do not include immediate family members.
  - a. Complete Part I of the Scholarship Recommendation Form prior to giving it to the individuals providing recommendation. Make copies as needed.
- 3. Request an official transcript(s)\* from the school(s) you are currently attending and have them mailed directly to the University of Nebraska High School Scholarship Committee (address below).

K.O. Broady Scholarship Committee

University of Nebraska High School

PO Box 880633

Lincoln, NE 68588-0633

The Scholarship Committee will only review completed applications. Be sure you have provided all of the following in order to be considered:

Application
Official transcript(s)* of high school coursework
Three (3) completed Scholarship Recommendation Forms

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<sup>\*</sup> If you have not taken any courses at the high school level, or if all of your high school coursework has been completed at University of Nebraska High School, you do not need to provide a transcript. All other applicants should provide a transcript in order to be considered, but do not need to provide an UNHS transcript.

# **K.O. BROADY SCHOLARSHIP**

APPLICATION		Toda	ay's Date:
itudent information			
ull legal name:			
F	First	MI	Last
ermanent Address:			Student Date of Birth:
Street			// (Month/Day/Year)
City	State	Zip	Country
hone:		Email:	
am earning my high school diploma	from:		
University of Nebraska High School	I		
Other, please specify:			
. Are you currently enrolled in an e	educational institution? Ye	es or No	
If yes, name of high school/institution:			
. List high schools or institutions w	vhere you have earned high	school credit in grades 9-	·12:
List high schools or institutions we Name of School	vhere you have earned high  City, State, Country	school credit in grades 9-	Dates Attended
-	,	school credit in grades 9-	
-	,	school credit in grades 9-	
Name of School  List one or two title(s) of University	City, State, Country		Dates Attended
Name of School	City, State, Country		Dates Attended
Name of School  List one or two title(s) of Universi are requesting financial aid.	City, State, Country		to take. Please check those for which
. List one or two title(s) of Universi are requesting financial aid.	City, State, Country		to take. Please check those for which



Nebrasity of Nebraska High School
1500 U St, Ste 200 | PO Box 880633 | Lincoln, NE 68588-0633 | Toll-free: (866) 700-4747 | Local & International: (402) 472-3388 System Fax: (402) 472-1901 | highschool@nebraska.edu | highschool.nebraska.edu

5. What are your immediate and long-term educational goals?		
6.	What effect will University of Nebraska High School Course(s) have on your educational program?	
7	Briefly describe how UNHS will best meet your educational goals.	
<i>/</i> •	Brieffy describe now UNTS will best meet your educational goals.	
8.	By what date do you expect to complete your UNHS course(s)?	
9.	If I am awarded the K.O. Broady Scholarship, I give permission to have my photo and a brief biographical statement about me published on UNHS communication sites.	

# **RECOMMENDATION FORM** (Please print or type)

Part I: To be completed by stude	ent					
Name of Student:						
Name of Student.	First	MI		Last		
Under the Family Education Rights a upon request. So that the person con to your inspection upon request, pleadecision.	npleting this Recomme	ndation Form will kr	now whether it will be l	neld in confidence or oper		
I understand I have the right to inspect I hereby <i>DO WAIVE</i> my right of accounts.			Education Rights and P	rivacy Act.		
Student's Signature:			_			
I DO NOT WAIVE my right of access	s to this recommendati	on form.				
Student's Signature:			_			
Part II: To be completed by pers	on providing recom	mendation				
Please respond to the following items. We take into consideration the student/applicant's financial need, motivation, ability to organize, ability to work independently and overall academic ability.						
1. Describe the applicant's financia	l need as best you und	lerstand it.				
2. Please comment upon the applic	ant's ability to organi	ze and to work inder	pendently.			



3. Please comment on the applicant's academic ability.			
4. Make any additional comments which you feel are appropriate.			
4. Make any additional comments which you leef are appropriate.			
Signature:	Date:		
Printed Name:			
Relationship to Applicant/Student:			