

HENRY AND RAMONA STALP SCHOLARSHIP

1. APPLICANT MUST BE A CURRENT GRADUATING SENIOR **WHO IS ATTENDING A CUMING COUNTY HIGH SCHOOL – BANCROFT-ROSALIE, GUARDIAN ANGELS CENTRAL CATHOLIC, WEST POINT-BEEMER, OR WISNER-PILGER** THAT IS APPROVED AND ACCREDITED BY THE STATE DEPARTMENT OF EDUCATION.
2. APPLICANT MUST BE SEEKING CONTINUED EDUCATION AT A **NEBRASKA** UNIVERSITY, COLLEGE, TECHNICAL OR TRADE SCHOOL OF APPLICANT'S CHOICE.
3. APPLICANT MUST HAVE A MINIMUM OF A "C" AVERAGE ON THE ALPHA SCALE OR 2.0 NUMERICALLY. NO EMPHASIS IS GIVEN FOR ACADEMIC SUCCESS OTHER THAN THE APPLICANT HAVING MET THIS REQUIREMENT.
4. APPLICANT MUST PROVIDE TWO (2) CONFIDENTIAL REFERENCES. BOTH REFERENCES SHOULD BE FROM NON-RELATIVES.
5. THERE IS NO LIMITATION ON PERSONS WHO ARE ELIGIBLE RECIPIENTS OF SCHOLARSHIPS. SCHOLARSHIPS WILL BE GIVEN WITHOUT REGARD TO RACE, CREED, RELIGION, NATIONAL ORIGIN OR SEX.
6. SCHOLARSHIP MONIES MUST BE USED WITHIN ONE ACADEMIC YEAR (JUNE 1, 2026 THRU JUNE 1, 2027)
7. SCHOLARSHIP FUNDS WILL BE SENT TO THE SELECTED RECIPIENT WHEN THE SCHOLARSHIP COMMITTEE HAS BEEN PROVIDED WITH PROOF THAT THE STUDENT HAS ENROLLED IN SCHOOL. **PROOF WILL BE A PHOTOCOPY OF THE STUDENT'S COLLEGE, TECHNICAL OR TRADE SCHOOL I.D. CARD.**
8. THE SCHOLARSHIP COMMITTEE, WHO ARE MEMBERS OF THE WEST POINT COMMUNITY FOUNDATION, WILL SELECT SCHOLARSHIP RECIPIENTS.
9. **APPLICANT MUST SIGN A LETTER OF EXPECTATION AS ACCEPTANCE.**
10. INCOMPLETE APPLICATIONS **WILL NOT** BE ACCEPTED OR CONSIDERED. PLEASE REVIEW YOUR APPLICATION FOR COMPLETENESS TO DETAIL, FILLING OUT ALL REQUESTED INFORMATION. CHECKLIST PROVIDED.
11. FIVE (5) SCHOLARSHIPS WILL BE AWARDED TO EACH OF THE FOUR (4) HIGH SCHOOLS IN CUMING COUNTY, A TOTAL OF TWENTY (20) SCHOLARSHIPS AWARDED.
12. APPLICATION MUST BE RECEIVED BY **MARCH 1, 2026.** SEND TO:

Melissa Knobbe, Co-Chair of
WPCF Scholarship Committee
1040 E Park St
West Point, NE 68788
Cell: 402-380-2259

WP



CF

WEST POINT COMMUNITY FOUNDATION

**"PASSING A TORCH
TO OUR FUTURE"**

HENRY AND RAMONA STALP SCHOLARSHIP

Dear Applicant:

Through the West Point Community Foundation, the Henry A. Stalp and Ramona F. Stalp Foundation is offering twenty (20) \$1,000 scholarships to current graduating seniors who are attending one of the four Cuming County High Schools – Bancroft-Rosalie, Guardian Angels Central Catholic, West Point-Beemer, and Wisner-Pilger. **Five scholarships will be awarded at each named school.** Scholarship recipients must plan on obtaining post-secondary education at a **Nebraska** university, college, technical or trade school. Applicants must have acquired a minimum of a "C" grade average on the alpha scale or 2.0 on the numeric scale during their high school experience.

If you are chosen to receive one of these scholarships, it will be necessary for you to complete at least one year of classes and maintain a minimum 2.0 GPA. If you drop out of school without completing the first semester, we expect the return of the scholarship funds so the money can be used by another student.

We hope you will consider applying for this scholarship if you are able to follow the guidelines. **Please sign this letter of expectation** to indicate that you accept these requirements and return it with your application by [March 1, 2026](#), to [Melissa Knobbe, 1040 E Park St, West Point, NE 68788](#)

If you have any questions, please contact Melissa Knobbe. Contact number – 402-380-2259.

West Point Community Foundation Scholarship Committee

Applicant (Student) Signature of Acceptance

Date

HENRY AND RAMONA STALP SCHOLARSHIP

APPLICANT (STUDENT) NAME: _____ DATE OF BIRTH: _____

PARENT(S) OR GUARDIAN(S)' NAME: _____

ADDRESS OF PARENT(S) OR GUARDIAN(S): _____

TOWN: _____

CUMING COUNTY HIGH SCHOOL CURRENTLY ATTENDING: _____

I PLAN TO ATTEND (NEBRASKA SCHOOL NAME): _____

ACCEPTED (____) YES (____) NO MAJOR AREA OF STUDY _____

OCCUPATIONAL INTERESTS UPON GRADUATION FROM POST SECONDARY SCHOOL: _____

PLEASE ATTACH RESUME COVERING AT LEAST THESE CATEGORIES:

HIGH SCHOOL ACTIVITIES AND AWARDS

COMMUNITY ACTIVITIES

ANY WORK EXPERIENCE

I HOPE TO BE INVOLVED IN THE FOLLOWING ACTIVITIES IN COLLEGE: _____

ATTACHED TO THIS FORM PLEASE STATE IN **400 WORDS OR LESS** why you have chosen your area of study; what you hope to accomplish after graduation; and why you should be considered for this scholarship.

ADMINISTRATION CERTIFICATION

I hereby certify that _____ has demonstrated good citizenship, character and cooperation in school and community activities and has a satisfactory scholarship record of at least a C or 2.0 average.

Number of Students in Class: _____

Applicant's Rank in Class: _____

ACT Score: _____

Superintendent, Principal or Guidance Counselor Signature

HENRY AND RAMONA STALP SCHOLARSHIP

CONFIDENTIAL REFERENCE STATEMENT

APPLICANT (STUDENT) NAME:
APPLICANT (STUDENT) ADDRESS:
REFERENCE FROM (NAME):
HOW LONG HAVE YOU KNOWN THE APPLICANT?
IN WHAT CAPACITY?
WHAT DO YOU CONSIDER THE APPLICANT'S STRONG POINTS?
WHAT DO YOU CONSIDER THE APPLICANT'S LIMITATIONS?

PLEASE CIRCLE YOUR RATING THE FOLLOWING CHARACTERISTICS FOR THE APPLICANT OR PLACE A CHECK MARK IN THE BOX BELOW "Do Not Know" IF UNABLE TO RATE. (COMPARED TO THE STUDENTS OF THE SAME AGE AND GRADE).

CHARACTERISTIC	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	DO NOT KNOW
INTELLECTUAL INTEREST	10 9 8	7 6 5	4 3 2	1	
RELIABILITY	10 9 8	7 6 5	4 3 2	1	
COOPERATION	10 9 8	7 6 5	4 3 2	1	
MATURITY	10 9 8	7 6 5	4 3 2	1	
PERSONAL APPEARANCE	10 9 8	7 6 5	4 3 2	1	
SOCIAL ADAPTABILITY	10 9 8	7 6 5	4 3 2	1	
EMOTIONAL ADAPTABILITY	10 9 8	7 6 5	4 3 2	1	
ABILITY TO SUCCEED IN POST SECONDARY EDUCATION	10 9 8	7 6 5	4 3 2	1	

IMPORTANT

(UNSIGNED REFERENCES WILL NOT BE CONSIDERED)

SIGNED BY:

REFERENCE MUST BE COMPLETED, RETURNED TO THE APPLICANT IN A [SEALED ENVELOPE ADDRESSED TO THE West Point Community Foundation Scholarship Committee](#) FOR THE APPLICANT TO SUBMIT TO THE SCHOLARSHIP COMMITTEE NO LATER THAN **MARCH 1, 2026**.

West Point Community Foundation Scholarship Committee

Melissa Knobbe, 1040 E Park St, West Point, NE 68788

Phone – 402-380-2259.

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SCHOLARSHIP APPLICATION CHECKLIST COVER

APPLICANT (STUDENT) NAME: _____ (PLEASE PRINT)

APPLICATION ITEMS ATTACHED:

_____ APPLICANT LETTER (SIGNED)

_____ APPLICANT/STUDENT INFORMATION (COMPLETED AND APPROPRIATELY SIGNED)

_____ ESSAY

_____ TWO (2) REFERENCES IN SEALED ENVELOPES – ENVELOPES ADDRESSED TO THE
WEST POINT COMMUNITY FOUNDATION SCHOLARSHIP COMMITTEE

_____ SENIOR PHOTO ATTACHED TO THIS CHECKLIST (PLEASE DO NOT USE A STAPLE).
THIS MUST BE A PHOTO – NOT A COPY ON REGULAR PAPER OR CARD STOCK.

**ALL ITEMS MUST BE COMPLETED, SIGNED AND ATTACHED OR
THE APPLICATION WILL BE CONSIDERED INCOMPLETE AND INELIGIBLE FOR SCHOLARSHIP CONSIDERATION**