



The Wisconsin Lab Association exists to improve the cause, technique, practice and knowledge of laboratory technicians through communication and educational opportunities.

To: Wisconsin Educational Institutions
From: Wisconsin Laboratory Association (WLA) Scholarship Committee
Re: WLA 2024 Scholarships

The Wisconsin Laboratory Association is offering ONE \$1,000.00 scholarship for 2024. To be considered, students must meet the following requirements:

1. All applicants must be one of the following at an accredited college or university having completed at least 1 semester of classes:
 - A. Technical Student
 - B. Undergraduate University Student
 - C. Graduate Student
2. All applicants must be enrolled in a curriculum that will enable them to pursue a career in a non-medical laboratory related field **and** have a 3.0 or higher Grade Point Average. (ex: cannot be pre-medicine, pre-veterinary, nursing, etc.)
3. All applicants **MUST** submit the following three pieces of information to the Scholarship Committee to be considered:
 - A. A completed WLA application form.
 - B. A current transcript from the school the student is presently attending.
 - C. Two letters of recommendation from the student's instructors.

The deadline for submitting **COMPLETED** applications and supporting documentation is March 31, 2024. Please note that incomplete applications will not be accepted. You must provide all the information above, but the deadline, in order to be eligible to receive the scholarship.

Please make this information accessible to any interested students (feel free to photocopy the information).

Please contact us if you require any further information or assistance. Applications are also available on the WLA website at: www.wisconsinlabassociation.org.

Sincerely,

Adam Brock 8418 Excelsior Drive Madison, WI 53717 abrock@wisconsinlabbrothers.org	Takiyah Ball 305 Pine Street Elkhart Lake, WI 53073 Takiyah.ball@sargento.com	Brandon Justinger P.O. Box 170 Plymouth, WI 53073 bjustinger@mastersgalleryfoods.com	Gina Steiner P.O. Box 808 Fort Atkinson, WI 53538 ginas@jonesdairyfarm.com
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WLA Scholarship Application

I. Personal Data

Name: _____

Address: _____

Phone: _____

E-Mail Address: _____

II. Educational Experience (High School and College/Technical School)

School	Location	Dates Attended
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_____	_____	_____
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_____	_____	_____
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III. Extra-Curricular Activities (High School and College)

Community Activities, Athletics, Social Clubs, Student Government

Special Achievement

Office Held, Prizes, Honor Classes, etc.

IV. Employment (Full-time, Part-Time, Summer Jobs)

Places & Dates	Job Description	Hours/Week
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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V. School

School/college you are attending? _____

Degree you are working toward? _____

What year you are presently in? _____

How did you become aware this scholarship was being offered?

VI. References

Please list two references, not relatives, one of whom is an instructor or teacher in the school you are attending.

Name	Occupation	Address and Phone
_____	_____	_____
_____	_____	_____

*Please ask two instructors to submit a letter of recommendation, which is to be sent under separate mailing to application address.

VII. Personal Statement (submit on a separate page)

Give any additional information that may help the Scholarship Committee. **This information and statement may be the deciding factor in awarding of the scholarship.** This information may include school or community activities, hobbies, special interests, etc. You should include your reasons for choosing laboratory related studies.

Please complete all portions of this and send it with your grades for the past school year to the address below. Be sure to have two letters of recommendation from your instructors also sent to this address or your application will not be accepted.

In submitting this application, I do hereby release my student records to the Wisconsin Laboratory Association Scholarship Committee for their use in awarding and administering this scholarship.

The information I have submitted is correct to the best of my knowledge.

Signature: _____

Date Submitted: _____

Send applications to:

Kathleen Mueller
P.O. Box 170
Plymouth, WI 53073
kmueller@mastersgalleryfoods.com