

Mabel E. Dupee

Scholarship Foundation



*Spreading the flame
of knowledge*

Mabel E. Dupee, a native of Vernon County Wisconsin was a teacher, as was her husband. For many years Ms. Dupee was a high school principal in eastern Wisconsin and than a professor at East Stroudsburg State College in Pennsylvania. Ms. Dupee returned to Wisconsin in 1965 after the death of her husband. The last eight years of Ms. Dupee's life were spent as a resident of the Morrow Memorial Home in Sparta. Ms. Dupee's devotion to education was the reason she established the opportunity for young people to achieve a higher education.

Those who were graduated from Sparta High School or a parochial school while their parents or guardians were residents of the Sparta Area School District are eligible, as are those who will be graduated this year.

Scholarship applications are available at River Bank and at the Sparta High School guidance office. Applications are also available at www.spartan.org.

Mabel E. Dupee Scholarship Foundation, Inc.

DUE DATE: MARCH 22, 2024

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STUDENT APPLICATION FORM

PERSONAL INFORMATION

_____	Name	_____	Maiden Name if applies	_____	Home Phone Number		
_____	Address	_____	City	_____	State	_____	Zip Code
_____	Name of High School	_____	Year of Graduation	_____	_____		_____

Date of Birth

Social Security Number

LETTER OF FINANCIAL AID REQUEST

On a separate sheet of paper please explain your need for financial aid in 75 - 100 words. Please type or use either black or blue ink. [Completeness of ideas, sentence construction, spelling and neatness are important.]

APPLICATION CONTINUED ON BACK OF THIS SHEET

Mabel E. Dupree Scholarship Foundation, Inc. Spreading the flame of knowledge DUE DATE: MARCH 22, 2024

Name of Applicant _____ Last _____ First _____ Middle _____ Social Security Number XXX - XX - _____
 (Last 4)

EXTRA CURRICULAR COMMUNITY ACTIVITIES

_____ / _____ / _____	Date	_____ / _____ / _____	Date
_____ / _____ / _____	Date	_____ / _____ / _____	Date

HONORS/OFFICES ACHIEVED

_____ / _____ / _____	Date	_____ / _____ / _____	Date
_____ / _____ / _____	Date	_____ / _____ / _____	Date

REFERENCES

NAME	ADDRESS	TELEPHONE
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School: _____

Personal: _____

Employment: _____

EMPLOYMENT RECORD (List most recent employment first)

FIRM	ADDRESS	TELEPHONE	DATES
_____	_____	_____	_____
_____	_____	_____	_____

FUTURE PLANS

College or University of choice _____ Address _____

Area of Study _____ Degree Sought _____

Years needed to complete degree _____ Which year will you be this fall (Circle one) 1st 2nd 3rd 4th

FINANCES

Anticipated tuition, books, room and board for one year \$ _____ Amount your family/spouse will contribute ----- \$ _____

Amount requested from this foundation ----- \$ _____ Other known grants, aids and scholarships this year \$ _____

Amount saved toward educational expenses ----- \$ _____ Name of Grant or Scholarship _____

This is my _____ year applying to this scholarship.

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ATTACH TO THIS APPLICATION

_____ High School grade transcript through 7th semester, if a high school senior

_____ Accumulative College transcript, if college/university student

_____ Letter of Financial Aid Request

I understand that I may apply each year up to and including my fourth year of post-high school education only. The scholarship check will be made payable to the college/university I attend. The college/university must be tax-exempt.

Signature _____ Date _____

RETURN THE COMPLETED APPLICATION ON OR BEFORE MARCH 22, 2024 TO:

**Mabel E. Dupree Scholarship
 C/O River Bank
 124 West Oak Street
 Sparta, WI 54656**