

American Fisheries Society
Wisconsin Chapter
Scholarship Application Form

Name: _____

College or University: _____

Address: _____ City/State _____ Zip _____

Tel.: () _____ E-Mail: _____

Major: _____ Year of planned completion: _____

Are you a member of the Wisconsin Chapter? Yes ___ No ___

[*You must be a member to be eligible for these scholarships. Student memberships are free. [Go here](#) to become a member.*]

Scholarship that you are applying for:

- Carroll Norden Memorial Scholarship**
- Tim Kroeff Fisheries Scholarship**
- both**

Please include:

- 1) This completed application form
- 2) A curriculum list that emphasizes fisheries or aquatic related courses (one-page maximum)
- 3) A statement of professional goals, accomplishments, and involvement in fisheries-related activities
- 4) Employment history related to fisheries (one-page maximum)
- 5) A supporting statement (letter of recommendation) from a college or university staff member or past employer

Submit Application by December 15 to: scholarship@wi-afs.org