



Wisconsin Department of Public Instruction
PRECOLLEGE SCHOLARSHIP APPLICATION
PI-1573 (Rev. 11-16)

Mail Application to:

UWM School of Cont Ed - College for Kids & Teens
161 W. Wisconsin Ave., Ste. 6000
Milwaukee, WI 53203

College Applying To

UW-Milwaukee

Precollege Program Name

College for Kids & College for Teens

INSTRUCTIONS FOR COLLEGE USE ONLY

Enter name and address of college or institution in space above.

You may receive a maximum of three DPI Precollege Scholarships per year.

STUDENT / PARENT INSTRUCTIONS: Student must be eligible for Free or Reduced Price School Meals, and must have finished fifth grade, but not have graduated from high school to receive a DPI Precollege Scholarship.

Fill out **Section I—Student Information completely**. Parent/guardian must sign in the space provided. Give this form to your principal or food services authorized representative at **your** school for completion of **Section II**. Once the signature is acquired through your middle or high school, mail the completed scholarship application **to the college or university** that is offering the precollege program.

I. STUDENT INFORMATION

Name Last

First

Middle Initial

Street Address

City

State

Zip

Phone Number Area Code/No.

Email

Date of Birth Mo./Day/Yr.

Gender

☐ Male

☐ Female

Check **only one** (For Statistical Purposes Only)

☐ Hispanic or Latino

☐ Not Hispanic or Latino

☐ American Indian or Alaska Native

☐ Asian

☐ Black or African-American

☐ Native Hawaiian/Other Pacific Islander

☐ White

Current Grade Level

☐ 5

☐ 6

☐ 7

☐ 8

☐ 9

☐ 10

☐ 11

☐ 12

Anticipated Year of High School Graduation

School Presently Attending

School District Name

No. of Prior Precollege Scholarships
Received This Calendar Year

I HEREBY AUTHORIZE release of my child's verification of Free or Reduced Price School Meals eligibility to the Precollege Campus and DPI.

Signature of Parent/Guardian



Date Signed Mo./Day/Yr.

II. VERIFICATION AND RECOMMENDATION

Instructions to the Principal, Food Services Authorized Representative, or DPI/WEOP Staff Member

Verify that this student is eligible for Free or Reduced Price School Meals and forward this application form to the college or university where the student has applied for admission to a DPI Precollege Program.

Is this student eligible for Free or Reduced Price School Meals?

☐ Yes

☐ No

I HAVE VERIFIED that this student is eligible for Free or Reduced Price School Meals and I recommend this student for a DPI Precollege Scholarship.

Name of Authorized Representative

Title

Telephone Area/No.

Verification Signature



Date Signed Mo./Day/Yr.