OUACHITA ELECTRIC COOPERATIVE CORPORATION
LINEMAN TRAINING PROGRAM SCHOLARSHIP APPLICATION

Completed application must be submitted to OECC on or before April 11, 2025: _____

Date submitted: _____

MUST RETURN WITH A COPY OF YOUR HIGH SCHOOL TRANSCRIPT **AND** AT LEAST 1 LETTER OF RECOMMENDATION

Student Information

Name: _____ Student Social Security Number: _____

Address: _____
Street *Town* *State* *Zip code*

Telephone: _____

Family Information

Mother's Name: _____

Is she living? _____

Home Address if different from yours: _____

_____

Occupation: _____

Organization: _____

College (if any): _____

Highest Degree: _____ Year: _____

Father's Name: _____

Is he living? _____

Home Address if different from yours: _____

_____

Occupation: _____

Organization: _____

College (if any): _____

Highest Degree: _____ Year: _____

If not with both parents, with whom do you make your permanent home? _____

Total number of children living at home including yourself: _____

Total number of others currently attending college: _____

Activities and Jobs

Position or Activity Description, Organization	Year

ESSAY. *IN 150 WORDS OR LESS, DESCRIBE WHY YOU WANT TO BE A LINEMAN:*

_____

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_____

I understand I must complete this program. If not completed, I must reimburse Ouachita Electric Cooperative for all expenses including tuition, books, tools, boots, and any other equipment provided by the cooperative.

Signature: _____ Date: _____

If under age 18, signature of parent/legal guardian

Signature: _____ Date: _____