



 Lincoln Community
FOUNDATION

Lucile E. Wright Memorial Scholarship

**University of Nebraska-Lincoln
College of Education and Human Sciences
on, Dietetics, or Food Service Management**

PERSONAL EXPERIENCE: (Please type or use black ink)

Name: _____ Student ID#: _____

Current Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Names of parents, guardian or spouse: _____

EDUCATIONAL EXPERIENCE:

Eligible Options in the Department of Nutrition and Health Sciences: Check all that apply

Community Health and Wellness Pre-Dietetics

Nutrition Science Nutrition, Exercise & Health Science

Hospitality, Restaurant and Tourism Management – Food and Beverage Emphasis

Other _____

Class in College 2024-2025: Sophomore Junior Senior GPA: _____

College organizations and leadership positions:

Digitized by srujanika@gmail.com

Honors and recognitions: _____

www.english-test.net

Plan for employment following graduation: _____

Please return by April 5th to:

University of Nebraska-Lincoln
College of Education and Human Sciences
135 Carolyn Pope Edwards Hall
Lincoln, NE 68588-0234