

Kathryn G. Hansen Scholarship 2026 Application

Name: _____

Email: _____

Address: _____

High School: _____

Address: _____

Year in school for 2025-2026: _____

Full time student: _____yes or _____no

Graduation date (month & year): _____

GPA: _____/ _____

Co-Curricular and community activities involved (attached addition page, if needed):

University or college attending Fall 2026: _____

Will you be in a Pathways to Illinois program in the Fall 2026 ____yes or ____no

City: _____State: _____

College major: _____

Resident of Illinois: _____yes or _____no

Citizen or permanent resident of the United States: _____yes or _____no