

**LARAMIE COUNTY COMMISSIONERS' SCHOLARSHIP APPLICATION**  
**310 W. 19<sup>TH</sup> STREET, SUITE 300, CHEYENNE, WY 82001**  
**(307) 633-4260**

Name: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or Box Number
City
State
Zip

High School Attended: \_\_\_\_\_ GPA: \_\_\_\_\_ Act Score: \_\_\_\_\_

Vocation Choice: \_\_\_\_\_ College Choice: \_\_\_\_\_

List Activities and Offices Held In School:

\_\_\_\_\_

Volunteer and Service Activities Outside of School:

\_\_\_\_\_

Name of Parents or Guardians: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Number in Family Not Self-Supporting: \_\_\_\_\_

The County functions as an arm of the State and must follow and enforce State Statutes. Nine people are elected into Office by registered voters in Laramie County, below is a list of the titles they hold. Insert the name of the Elected Official currently holding that title and name two official duties or responsibilities of each office per State Statutes.

<u>NAME</u>	<u>DUTIES AND RESPONSIBILITIES</u>
Assessor: _____	1. _____ 2. _____
Clerk: _____	1. _____ 2. _____
Clerk Of District Court: _____	1. _____ 2. _____
Commissioners: _____ _____ _____	1. _____ 2. _____
Coroner: _____	1. _____ 2. _____
Sheriff: _____	1. _____ 2. _____
Treasurer: _____	1. _____ 2. _____

First Time Applicant \_\_\_ or Renewal \_\_\_ College Attended: \_\_\_\_\_ GPA: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number of Applicant: \_\_\_\_\_

Please return this application to the Commissioner's office with a letter(s) of recommendation and a copy of your transcript. Application must be postmarked or returned to our office no later than April 1, 2010.

Note: Attached is a copy of the Wyoming statute section 21-17-105, 1977 which regulates this Scholarship Program.