

# MARTA NIXON MEMORIAL SCHOLARSHIP APPLICATION

Nominee's Name \_\_\_\_\_

Date \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Sex: Male      Female

Date of Birth \_\_\_\_\_

## **Educational**

High School \_\_\_\_\_

College \_\_\_\_\_

*Name of School, Years Attended,  
Degree(s)*

## **Other Experience - Drycleaning Plants**

Name of Plant \_\_\_\_\_

Date of Employment \_\_\_\_\_ Title \_\_\_\_\_

*Use additional pages if  
necessary*

## **Areas of Experience**

*Check all that apply*

Drycleaning      Spotting      Finishing Sales      Marketing/Checking      Maintenance      Office

Years in Drycleaning Industry \_\_\_\_\_

Other Interests \_\_\_\_\_

## Current Employment

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Signature-Applicant \_\_\_\_\_ Signature-Owner/Manager \_\_\_\_\_