

**Y.T. Johnson Science Day Scholarship
Nomination Form**

To be completed by science teacher

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Teacher Information

Your Name: _____

Subject(s) Taught: _____

Phone: _____

Email: _____

High School: _____

High School Address: _____

City, State, Zip: _____

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Student Information

Name: _____

Phone: _____

Email: _____

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Submit nomination to:

**Office of Admission
c/o Y.T. Johnson Scholarship Committee
Augustana College
2001 S. Summit Ave.
Sioux Falls, SD 57197**

Phone: 605.274.5516

Fax: 605.274.5518

Email: admission@augie.edu