

SCHOLARSHIP PROGRAM APPLICATION MEMBER COOPERATIVE

Basin Electric Power Cooperative - Member Cooperative Scholarship Program							
Scholarsh	nip Subm	ittal Requi	em	ents			
The student is responsible for submitting all materials on time. Incomplete applications will not be evaluated. 1. Complete this application (attach additional sheets if necessary). Your name and address should be on all attachments. Completeness and neatness ensure your application will be evaluated appropriately.							
2. Recent academic transcript whether it is from a high school, college, university, or trade school. <u>CURRENT COLLEGE FRESHMAN</u> - Judges will screen and require more than one semester or quarter of grades. If this applies to you, submit your high school transcript.							
☐ 3. Copy of your college entrance examina							
4. Essay - What challenges face rural electric cooperatives in the coming years and how do you think challenges should be addressed?							
5. Applicant appraisal.							
 6. Send this application and all supporting documentation to your member cooperative. (Each member cooperative will be responsible for selecting finalists in these categories). Cooperative applications MUST be sent to the cooperative. 							
Check with your local rural electric cooperative for deadline dates.							
Completed applications must be	receive	d by MWE	C nc	later than	ı Febr	uary 10th.	
All scholarship entries are confidential and will only be viewed by the Basin Electric Power Cooperative or member cooperative selection committee.							
Applicant Information							
Applicant Name:		me Phone:		College Ph		Last 4 Digits of SSN#:	
Permanent Address (Street/PO Box):	City:	Sta		Zip:	Ema	il:	
Mother's Name:	ther's Name: Father's Name:						
Student's Parent is:							
Cooperative System Name:							
Cooperative Location (City, State, Zip):							
High School Name and Address from which you graduate or will be graduating this spring:							
Activities, Community Involvement, Achievements, and/or Honors:							

Sending a resume does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address, and name of this scholarship program should be included on all attachments.								
Work Experience								
Describe your work experience (e.g. food server, babysitting, lawn mow			dicate date	s of				
employment for each job and approximate number of hours worke	ed each w		T -	Hours por				
Employer/Position		From (Mo/Yr)	To (Mo/Yr)	Hours per Week				
mp.oyem cetter		(1110)	(1110)					
Goals and Aspiration	S							
Write a brief summary of your plans as they relate to your educational and career objectives and long-term goals.								
Education								
High School Seniors - must include a transcript and complete this section. Students currently or previously enrolled in college or vocational-tech schools - must include college transcripts of grades. Completion of ACT and/or SAT tests is not necessary.								
GPA:								
ACT Scores:								
English: Math: Reading:	Science: Comp:							
SAT I Scores:								
Verbal: Math:								
School								
Name and address of accredited school you plan to attend in the fall of the year:								
Name		City						
☐ 4-Yr. College or University ☐ 2-Yr. Community or Junior College ☐ Vocational-Technical School								
What will your class status be this fall?								
Major Course of Study: Minors:								

	Essay Questio	n (Re	equired)					
As part of the application, you are requ than one page, typed with a font size n Include your name on the top right-han	o smaller than 12 d corner of the es	point say.	t, and double	spaced on	8 ½ X	11" size paper.		
What challenges face rural electric cooperatives in the coming years and how do you think challenges should be addressed?								
(Applicant Signature)				(Date)				
A	Applicant Appra	isal (Required)					
To the applicant: This section is require application will not be evaluated. The sadvisor, an instructor, or a work superv	ection is to be co risor who knows y	mplet ou we	ed by a high ell.	school or c	ollege (counselor or		
To the adult appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to the applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.								
The applicant's choice of a post-	☐ Extremely		Very	☐ Moder				
secondary educational program is: The applicant's achievements reflect his/her ability:	Appropriate Extremely Well		oropriate Very Well	Appropria Moder Well		Inappropriate Not Well		
The applicant's ability to set realistic and attainable goals is:	Excellent		Good	Fair		Poor		
The quality of the applicants commitment to school and/or community is:	Excellent		Good	☐ Fair		Poor		
The applicant is able to seek, find, and use learning resources:	Extremely Well		Very Well	☐ Moderately Well		☐ Not Well		
The applicant demonstrates curiosity and initiative:	Extremely Well		Very Well	☐ Moder Well	ately	☐ Not Well		
The applicant demonstrates good problem-solving skills, follows through, and completes tasks:	Extremely Well		Very Well	Vell Moderatel Well		☐ Not Well		
The applicant's respect for self and other is:	Excellent		Good	☐ Fair		Poor		
Comments:								
Appraiser's Name:	Appraiser's Name: Title: C			n:	Phone No.:			
(Appraiser Signature)				(Date)				