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| **Basin Electric Power Cooperative - Member Cooperative Scholarship Program** | | | | | | | | | | | | | | | | | | | | | | | | |
| Scholarship Submittal Requirements | | | | | | | | | | | | | | | | | | | | | | | | |
| 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. | | | | | | | | | | | | | | | | | | | | | | | |
|  | 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 examination *(ACT and/or SAT)* scores. | | | | | | | | | | | | | | | | | | | | | | | |
|  | 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**. | | | | | | | | | | | | | | | | | | | | | | | | |
| Must be submitted to Jessica Cook at Lacreek Electric by **February 15th.** | | | | | | | | | | | | | | | | | | | | | | | | |
| 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: | | | | | | | | Home Phone: | | | | | College Phone: | | | | | | Last 4 Digits of SSN#: | | | | | |
| Permanent Address *(Street/PO Box)*: | | | | | | | City: | | | | State: | | | | Zip: | | | Email: | | | | | | |
| Mother’s Name: | | | | | | | | | Father’s Name: | | | | | | | | | | | | | | | |
| Student’s Parent is: | | | Member Cooperative Employee | | | | | | | | | | | | | | | | | | | | | |
|  | | | Member Cooperative Consumer | | | | | | | | | | | | | | | | | | | | | |
| 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 mowing, and office work)*. Indicate dates of employment for each job and approximate number of hours worked each week. | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer/Position | | | | | | | | | | | | | | | | | From *(Mo/Yr)* | | | To *(Mo/Yr)* | | | | Hours per Week |
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| **Goals and Aspirations** | | | | | | | | | | | | | | | | | | | | | | | | |
| Write a brief summary of your plans as they relate to your educational and career objectives and long-term goals. | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Education** | | | | | | | | | | | | | | | | | | | | | | | | |
| High School Seniors - must include a transcript and complete this section. | | | | | | | | | | | | | | | | | | | | | | | | |
| 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** | | | | | | | | | **State** | |
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| 4-Yr. College or University | | | | 2-Yr. Community or Junior College | | | | | | | | | | | | Vocational-Technical School | | | | | | | | |
| What will your class status be this fall? | | | | | Freshman | | | | | Sophomore | | | | | | | | Junior | | | | Senior | | |
| Major Course of Study: | | | | | | | | | Minors: | | | | | | | | | | | | | | | |

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| **Essay Question** ***(Required)*** | | | | | | | | |
| As part of the application, you are required to compose and submit an essay. The essay should be no more than one page, typed with a font size no smaller than 12 point, and double-spaced on 8 ½ X 11” size paper. Include your name on the top right-hand corner of the essay. | | | | | | | | |
| What challenges face rural electric cooperatives in the coming years and how do you think challenges should be addressed? | | | | | | | | |
|  | | | | |  | | | |
| *(Applicant Signature)* | | | | | *(Date)* | | | |
| **Applicant Appraisal *(Required)*** | | | | | | | | |
| To the applicant: This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.  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-secondary educational program is: | Extremely Appropriate | | Very Appropriate | | Moderately Appropriate | | | Inappropriate |
| The applicant’s achievements reflect his/her ability: | Extremely Well | | Very Well | | Moderately Well | | | 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 | | Moderately Well | | | Not Well |
| The applicant demonstrates good problem-solving skills, follows through, and completes tasks: | Extremely Well | | Very Well | | Moderately Well | | | Not Well |
| The applicant’s respect for self and other is: | Excellent | | Good | | Fair | | | Poor |
| Comments: | | | | | | | | |
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| Appraiser’s Name: | | Title: | | Organization: | | | Phone No.: | |
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| *(Appraiser Signature)* | | | | | | *(Date)* | | |