

SCHOLARSHIP PROGRAM APPLICATION MEMBER COOPERATIVE

Basin Electric Power Cooperative - Member Cooperative Scholarship Program							
Scholarsh	nip Submittal R	equiren	nents				
The student is responsible for submitting all m	aterials on tim	e. Incon	nplete appli	catior	ns will not be evaluated.		
1. Complete this application <i>(attach additional sheets if necessary)</i> . 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 examination (ACT and/or SAT) scores. (College Freshman Only)							
 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 (Each member cooperative will be responded)	•	-					
DEADLINE: February 10, 2025 Member cooperatives' must submit their finalists to Basin Electric Power Cooperative by March 1 st . All scholarship entries are confidential and will only be viewed by the Basin Electric Power Cooperative or member cooperative selection committee.							
Ap	plicant Inforn	ation					
Applicant Name:	Home Pr	one:	College Ph	one:	Last 4 Digits of SSN#:		
Permanent Address (Street/PO Box):	City:	State:	Zip:	Ema	ail:		
Mother's Name:	Fath	Father's Name:					
Student's Parent is: Member Cooperative Employee							
Cooperative System Name:							
Cooperative Location (City, State, Zip):							

Activities, Community Involvement, Achievements, and/or Honors
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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.

Empl	oyer/Position			From (Mo/Yr)	To (Mo/Yr)	Week	
		• • •					
Goals and Aspirations							
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 atte	end in the fal	l of the	year:			
Nai	me			City		State	
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4-Yr. College or University 2-Yr. Community or Junior College Vocational-Technical School						ical School	
What will your class status be this fall?							
Major Course of Study:		Minors:					

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.									
<u>To the adult appraiser</u> : 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-			/ery	Moderately					
secondary educational program is: The applicant's achievements reflect his/her ability:	Appropriate		vopriate Very Well	Appropriate		Inappropriate			
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	<u>п</u>	/ery Well	Moderately Well		Not Well			
The applicant demonstrates curiosity and initiative:	Extremely Well	<u>п</u> ,	/ery Well	Moderately Well		Not Well			
The applicant demonstrates good problem-solving skills, follows through, and completes tasks:	Extremely Well		/ery Well	Moderately Well		☐ Not Well			
The applicant's respect for self and other is:	Excellent		Good	🗌 Fair		Poor			
Comments:									
Appraiser's Name:	Title:		Organizatio	n:	Phone	e No.:			
(Approisor Signature)									
(Appraiser Signature) (Date)									