

SCHOLARSHIP PROGRAM APPLICATION MEMBER COOPERATIVE

Basin Electric Power Cooperative - Member Cooperative Scholarship Program								
Scholarsh	nip Subr	nittal R	equiren	nents				
 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 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 documentation to your member cooperative. <i>(Each member cooperative will be responsible for selecting finalists in these categories)</i> .								
Cooperative applications <u>MUST</u> be sent to the cooperative.								
Applications must be submitted to Dakota Energy Cooperative by January 29, 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.								
Applicant Information								
Applicant Name:	H	ome Ph	ome Phone: College Phone: L		Last 4 Digits of SSN#:			
Permanent Address (Street/PO Box):	City:		State:	Zip:	Email:			
Mother's Name:	1	Fath	er's Nai	's Name:				
Student's Parent is: Image: Member Cooperative Employee Image: 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.								
				From	То	Hours per		
Empl	oyer/Position			(Mo/Yr)	(Mo/Yr)	Week		
	Goals and Aspira	tions				<u> </u>		
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:	ath: Reading: Sci			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		
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 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 $\frac{1}{2}$ X 11" size paper. Include your name on the top right-hand corner of the essay.								
How does the electricity provided by your electric cooperative improve the quality of life in your community?								
(Applicant Signature) (Date)								
Applicant Appraisal (Required)								
<u>To the applicant</u> : 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- secondary educational program is:	Extremely Appropriate		Very propriate	Appropria		☐ 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:								
Appraiser's Name:	Title: Organization		ו: Phone		e No.:			
(Appraiser Signature) (Date)								