## MONTANA ELECTRIC COOPERATIVES' ASSOCIATION MEMORIAL SCHOLARSHIP

APPLICANT OR PARENT/GUARDIAN MUST BE A MEMBER OF A MONTANA ELECTRIC COOPERATIVE AND YOUR LOCAL ELECTRIC COOPERATIVE MUST BE A MEMBER OF MONTANA ELECTRIC COOPERATIVES' ASSOCIATION

NAME:	PHONE			
EMAIL ADDRESS:				
HOME ADDRESS:Street/Box/RR		City, State, Zip		
PARENT'S NAME:		,, ,		
COOPERATIVE NAME:			-	
COOPERATIVE ACCOUNT NUMBER:				
			-	
BIRTH DATE:				
HIGH SCHOOL ATTENDING/ATTENDED:				
HIGH SCHOOL GPA: CLASS				
COLLEGE/SCHOOL PLANNING TO ATTEND: _				
COLLEGE/SCHOOL ATTENDING:				
YOUR APPLICATION WILL BE JUDGED BASE	D ON THE FOLLOW	ING COMPONENTS:		
<ul> <li>20% Academic Strength (as demonstrated)</li> <li>20% Activities in School and Community</li> <li>20% Employment, Volunteerism, and Community</li> <li>40% Personal Statement</li> </ul>	ity, Awards & Honors	sework, GPA and nationa	testing score	es)
ATTACH INFORMATION IN REGARDS TO:				
<ul> <li>Grades         Attach a copy of your school transcripts     </li> <li>ACT/SAT scores</li> </ul>				
Attach a copy of your scores  Activities in School & Community				
Attach copies of awards and/or honors reservice	eceived and a descri	ption of any extracurricula	r activities ar	nd volunteer
<ul> <li>High School and/or College employmer List employer, position, hours worked we</li> </ul>		hool year and/or summer	employment	
Personal Statement     Write about how your school/community, should be no more than two, double-spa	/work activities will ir	•		
One letter of recommendation	,, , ,			
APPLICANT'S SIGNATURE:		DATE:		

RETURN COMPLETED APPLICATION WITH APPLICANT'S SIGNATURE AND ALL SUPPORTING DOCUMENTATION TO SUN RIVER ELECTRIC CO-OP NO LATER THAN January 26, 2024