

# SUN RIVER ELECTRIC COOPERATIVE CONTINUING EDUCATION SCHOLARSHIP APPLICATION

DUE DATE: FEBRUARY 28, 2025

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Name of Sun River Electric Member (Applicant, Parent, or Guardian):

\_\_\_\_\_

Name of College, University, or College of Technology Attending:

\_\_\_\_\_

The application must include a personal statement containing information about future goals, employment, and need. Space is provided on the back of this page.

Please attach a copy of your current college transcript.

Applicant's Signature: \_\_\_\_\_

Return to: SUN RIVER ELECTRIC COOPERATIVE, INC.  
ATTN: LEANNE  
PO BOX 309  
FAIRFIELD, MT 59436-0309

