

De Smet Community Scholarship



P.O. Box 157
De Smet, SD 57231-0157

De Smet Community Scholarship Requirements

The student is responsible for submitting all materials on time. Incomplete applications will not be evaluated. If you fail to mail your application by US Mail and postmarked by the deadline, your application will not be accepted.

1. Complete this application. Do not write on the back of any pages. Do not fold or staple any pages. Completeness and neatness ensure your application will be evaluated appropriately.
2. Mail completed application in a manilla envelope (the school *will not* provide this for you) by U.S. Mail Postmarked **NO LATER** than **February 28th** to:
De Smet Community Scholarship
P.O. Box 157
De Smet, SD 57231-0157
3. Both you and your parent/guardian (if you are under the age of 18) must sign the release of academic information form below.

This form also serves as the application for the following scholarships:

- Bowes Memorial Scholarship for nursing students
- Arlene Harris Scholarship
- Dave Wilson Memorial Scholarship- to be given to a graduating senior intending to attend a South Dakota technical college or institute

Scholarships will be awarded based on academics, character and need. Scholarship awards may be used for any college, technical school, or other advanced training as approved by the scholarship committee. All applicants will be asked to appear before the scholarship committee for an interview. Please complete this application (preferably typed) and **mail to the address listed above**. An electronic version of the application is available by contacting Mr. Julius. By downloading the electronic version and saving it, you will be able to type on the application, print and mail the completed application to the address listed above.

Name of Applicant: _____

Signatures release academic information (i.e., ACT, class rank, GPA, and transcript) to the scholarship selection committee by the counselor.

Parent/Guardian Signature

Date

Student Signature

Date

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De Smet Community Scholarship Application

Name of Applicant:

What is your planned area of study?

Where do you plan to attend school?

Have you applied to the school? Yes NO

Have you been accepted? Yes NO

On a separate sheet of paper, please provide answers to questions 1-5. Your name should appear on all pages of your application.

1. How have you demonstrated scholarship? Scholarship may be defined as the desire to learn and share your knowledge and experience with others.
2. Please comment on your need for financial assistance to further your education. Include how you have contributed financially to your education and the assistance you can expect from your family. Include any scholarships, grants, etc. you have already received up to this date.
3. How have you demonstrated leadership, responsibility, and initiative in school and in your community?
4. Comment on your choice of career and school. How did you arrive at that decision? Who or what circumstances have influenced you? What are your career objectives?
5. Make a personal statement explaining why you would like a community scholarship, how you plan to maximize your potential and any further statements you feel will provide information of value to the scholarship committee. (at least 200 words)

Activities: Include offices held, special awards, honors, and recognition.

List by grade:

Grade 9

Grade 10

Grade 11

Grade 12

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Name of Applicant: _____

Community Activities:

Other Awards and Honors: