

2017
SANDHILLS AREA FOUNDATION
HIGH SCHOOL SCHOLARSHIP RECIPIENT SELECTION CRITERIA

1. Applicants must be a resident of Cherry County or any student enrolled in a Cherry County high school.
2. Scholarship applicants must be a graduating high school senior.
3. Applicants must plan to attend any accredited college, university, junior college, vocational school, or any institution offering accredited nursing degrees as a full-time student.
4. Application and all documents must be typed.
5. A **photograph** of candidate, used for publication is required with the original application.
6. Letter of Intent is required with application:
 - Enclose a typed letter to the Sandhills Area Foundation Scholarship Committee describing your educational and personal goals, your community involvement as well as your plans for financing your college education and need for financial assistance.
7. Letter of Recommendation is required with application:
 - Enclose a typed letter of recommendation from an individual familiar with your character.
 - Please **exclude** relatives and/or any person employed by your school system for this letter.
 - This letter should be **dated and signed** by maker.
8. Official Transcript is required with application:
 - Include your **official** high school transcript.
 - Your original transcript must be signed, dated and/or have its official stamp or seal.
9. **Applicant must submit 1 original and 6 copies of entire application package.** (Not including photograph, only 1 photo with the original application is needed.)
10. Please submit only the items requested. Do not send materials separately.
11. Submit complete, signed and dated application, including all documentation and copies.
12. **Applications must be received on or before March 10, 2017.** Mail applications to: Sandhills Area Foundation, P.O. Box 444, Valentine, NE 69201. Applications may be hand delivered to: Young's Western Wear, 143 N. Main Street, Valentine, NE. Hand delivered envelopes must have the date received noted on the envelope.
13. Scholarship Acceptance:
 - Scholarship recipients and their parent(s) or guardian(s) will be invited to a Recognition Dinner at which time the winners will be honored and scholarships will be presented. If a scholarship winner cannot be in attendance, there **must** be a representative present to accept the scholarship on his/her behalf.

Only applications meeting these criteria will be considered.

Please note that all scholarships are competitive. The Sandhills Area Foundation Scholarship Committee may not award scholarships to all who apply.

SANDHILLS AREA FOUNDATION
2017 HIGH SCHOOL SCHOLARSHIP APPLICATION

Deadline: March 10, 2017

1. PERSONAL INFORMATION

Last Name: _____ First Name: _____

Parent(s) or Guardian(s) Name: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____ County: _____

Email address: _____ Telephone number: _____

2. EDUCATIONAL INFORMATION

High School presently attending: _____

Graduation Date: _____ Grade Point Average: _____

Class Rank: _____ Number in Graduating Class: _____

ACT Score: _____ SAT Score: _____

College/Educational institution you plan to attend: _____

Address of School: _____

Major/Area of educational concentration: _____

3. VOLUNTEER, COMMUNITY AND SCHOOL ACTIVITIES AND AWARDS

Describe in the space provided your current volunteer, community and school activities and awards.

4. EMPLOYMENT/ WORK EXPERIENCE

Please give a brief description of your current employment and/or work experience and the duties and time involved.

5. FINANCIAL NEED

Please give a detailed account of your anticipated 2017-2018 school year expenses (i.e. tuition, room and board, books).
Include a total estimated cost of attendance.

Have you applied for financial aid? _____.

What is your Expected Family Contribution (EFC) _____ from your FAFSA application.

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List all scholarships and sources of financial assistance you **are receiving or expect to receive** during the 2017-2018 school year and their **value** (include grants and aid through the university and/or any other federal, state, or local government agency).

Please describe any circumstances related to your family's financial status which would give the Sandhills Area Foundation Scholarship Committee a better understanding of your need for financial assistance.

6. CERTIFICATION

I certify that all the information on this form is true and complete to the best of my knowledge. I understand that the financial information will be confidential, for review solely by the Sandhills Area Foundation.

Signature of Applicant: _____

Date Signed: _____

Application deadline is March 10, 2017

Mail applications to:
Sandhills Area Foundation
PO Box 444
Valentine, NE 69201

Or

Applications may be hand delivered to:
Young's Western Wear
c/o Mary Young
143 N Main Street
Valentine, NE 69201

Checklist for original application package:

- Complete application (signed and dated)
- Letter of Intent
- Letter of Recommendation (signed and dated by maker)
- Official transcript (signed, dated and/or have official stamp or seal)
- Photo of candidate

APPLICATION AND ALL DOCUMENTS MUST BE TYPED.

SUBMIT 1 ORIGINAL AND 6 COPIES OF ENTIRE APPLICATION PACKAGE (Not including photo, only 1 with original application is needed)

DO NOT SEND MATERIALS SEPARATELY. (Application and sets of copies may be stapled in top left hand corner)

THE APPLICATION PACKAGE AND/OR COPIES WILL NOT BE CONSIDERED UNLESS COMPLETE.