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		
HOME ADDRESS:St	reet/Box/RR	City, State, Zip	
COOPERATIVE NAME:			
COOPERATIVE ACCOUNT N	UMBER:		
BIRTH DATE:			
HIGH SCHOOL ATTENDING/	ATTENDED:		
HIGH SCHOOL GPA:	CLASS RANKING:	OF	
COLLEGE/SCHOOL PLANNING TO ATTEND:			
COLLEGE/SCHOOL ATTENDING:			
YOUR APPLICATION WILL B	E JUDGED BASED ON THE FOLLO	WING COMPONENTS:	
 20% Activities in Sc 	hool and Community, Awards & Honor Jolunteerism, and Community Service	ursework, GPA and national testing scores) rs	
ATTACH INFORMATION IN R	EGARDS TO:		
 service High School and/or C List employer, positio Personal Statement Write about how you 	r scores c Community rds and/or honors received and a description, hours worked weekly pertaining to see school/community/work activities will nan two, double-spaced typed pages.	cription of any extracurricular activities and volunteer school year and/or summer employment influence your goals and career choice. This stateme	
APPLICANT'S SIGNATURE:		DATE:	