

Robert J. Peterson Eagle Scout Scholarship Criteria Dickinson Area Community Foundation

One or more scholarship recipient(s) will be chosen annually. The recipient(s) shall receive a one-time Scholarship Award in an amount to be determined annually based upon earned income of the fund.

Eligibility:

- 1. The scholarship is available to graduating seniors of Iron Mountain, Kingsford, North Dickinson, Florence or Niagara High Schools.
- 2. The scholarship will be a one-time award.
- 3. The recipient must be entering a degree-granting program at a two or four-year post-secondary institution of higher learning.
- 4. Applicants must have a 3.0 or greater G.P.A. in high school and have demonstrated the ability to do college-level coursework.
- 5. Applicants shall have attained the rank of Eagle Scout in the Boy Scout Program and provide a date of their Board of Review.
- 6. Applicants must provide a personal statement as to how the Boy Scout Program has influenced their lives and their future goals and objectives, as well as a list of community service activities including their Eagle Scout Project paperwork.
- 7. Applicant must provide a letter from their Scout Leader attesting to their active participation in the Scouting Program, as well as any other letters of recommendation they feel attest to their character and service.
- 8. Financial need of the applicant shall be a minor factor in the selection of students for the Scholarship, but not the sole factor, as outstanding academic achievement and outstanding community service activities shall also be considered a major factor in student selection.
- 9. All completed applications must be returned to the Guidance Office by **March 15th**. Failure to turn in a completed application by the due date will result in the student being ineligible to apply for this scholarship.
- 10. In the event the Scholarship Selection Committee does not feel applicants for a particular year warrant the scholarship, then no award shall be given out and eligible funds shall remain in the scholarship fund account.
- 11. A scholarship award may be revoked by the DACF Board of Trustees because of:
 - a. Criminal or anti-social conduct of recipient.
 - b. Filing false information on application.
 - c. Scholastic inadequacy of a recipient.
 - d. For such other good cause as the Board may, in its sole discretion, determine.

Revocation shall be by the action of a majority of the members of the DACF Board of Trustees, and upon such revocation, any and all funds still controlled by the Board of Trustees shall be withheld and disposed of at the discretion of the Board.

Revised 2022/11/25 Page 1 of 1



Robert J. Peterson Eagle Scout Scholarship

Boy Scout Troop 526 of Iron Mountain Dickinson Area Community Foundation Completed applications must be submitted by March 15th

Date		
Full Name		
Street Address		
City ST ZIP Code		
Home Phone		
Email Address		
High School Attended		
GPA		
Boy Scout Troop #:		
Date of Board Review:		
What extra-curricular activities did you participate in? Include in-school activities and activities outside of school. List position held, if applicable:		
In what scouting activities did you participate? Include awards/certificates of achievement, etc:		
Did you work during the so	chool year?	If yes, how many hours/week?
Name of college or university you plan to attend:		
Have you applied for admission?		
Have you been accepted?		
Intended field of study:		

Revised 2022/11/25 Page 1 of 3

Have you applied for other scholarships?				
Have you been granted a scholarship?	If so, list below name of scholarship & amount:			
Please include the following with the application:				
Please attach a personal statement which includes your comments on how the Boy Scout				
program has influenced your life and your future goals and objectives.				
2. Provide a copy of your Eagle Project paperwork.				
3. Provide a list of community service activities you were involved in.				
4. Provide a letter from your Scout leader attesting to your active participation in the scout program.				
 Provide letters of recommendation attesting to your character and service. 				
6. Please provide a copy of your high school transcripts.				
Application deadline				
All applications need to be submitted to the guidance counselor's office by March 15 th .				
Applicant agreement and signature				
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand				
	esentations made by me on this application may result			
in rejection of this application.				
Name (printed)				
Signature				
Date				
Parent/guardian application form				
Name of parent or guardian completing this form:				
Home address:				
Phone:				
Do you have any other dependents or extenuating circumstances that should be considered? If yes, please explain:				
Please note here any additional information which may assist the scholarship selection committee in consideration of the applicant:				

Parent/guardian agreement and signature:	
	replete. I understand any false statements, omissions, plication may result in rejection of this application.
Signature of parent or guardian:	
Date:	
RELEASE OF I hereby certify that any information needed regard to the Director of the Dickinson Area Community F Scholarship Committee.	
Signature of Applicant:	Date: