

## James R. Petroff Memorial Scholarship Criteria

One or more scholarship recipient(s) will be chosen annually from Iron Mountain High School applicants who are pursuing a degree related to public service. The recipient(s) shall receive a one-time scholarship award.

### Criteria:

- 1. The scholarship is available to graduating seniors of Iron Mountain High School. In addition to seniors, any exceptionally gifted student who will be proceeding directly to college/ university in the subsequent academic year without graduating from high school is eligible to apply for this scholarship.
- 2. The scholarship will be a one-time award made payable to the college/university the student is attending.
- 3. The recipient must be entering a degree-granting program at a four-year postsecondary institution of higher learning pursuing a degree related to public service, including but not limited to political science, law enforcement, nursing, education, or conservational services.
- 4. Applicants must have a 2.5 or greater G.P.A. in high school and have demonstrated the ability to do college-level coursework.
- 5. Applicants shall have demonstrated service to the school and/or community. Documentation must be provided through an acknowledging reference letter from a person who is familiar with the student (not family). The letter must recognize the student's commitment to the community and cite specific examples of the service(s) the student has provided to the community.
- 6. Applicants must attach a brief statement (3-4 paragraphs) addressing the following:
  - a. How have the services you provided to the community impacted the community?
  - b. How have the services you have provided to the community impacted you?
  - c. What suggestion do you have for involving young people in community service in the future?
- 7. The financial need of the applicant shall be a factor in the selection of students for the scholarship, but not the sole factor, as outstanding academic achievement shall also be considered a major factor in student selection.
- 8. A transcript of the student's high school records must be provided.

- All applicants must adhere to Guidance Counselor deadlines. Failure to turn in a completed application by the due date will result in the student being ineligible for this scholarship. Guidance Counselors, all completed applications must be returned to DACF by March 15<sup>th</sup>.
- 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:
  - Criminal or anti-social conduct of recipient.
  - Filing false information on application.
  - Scholastic inadequacy of a recipient.
  - 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.



# James R. Petroff Memorial Scholarship

Date						
Full Name						
Street Address						
City ST ZIP Code						
Phone						
Email Address						
High School Attended						
GPA						
What extra-curricular and community service activities did you participate in? Include in-school activities and activities outside of school. List position held, if applicable.						
Did you work during the school year?		If yes, how many hours/week?				
Name of college or university you plan to attend:						
Have you applied for adr	nission?					
Have you been accepted?						
Intended field of study:						
Have you applied for other scholarships?						
Have you been granted a scholarship? If so, name of scholarship and amount:						

Please include the following with the application:					
<ol> <li>An acknowledging reference letter from a person who is familiar with you (cannot be a family member). The letter must recognize your commitment to the community and cite specific examples of the services you have provided to the community.</li> </ol>					
2. A brief statement (3-4 paragraphs) addressing the following:					
<ul> <li>How have t community'</li> </ul>	ive the services you provided to the community impacted the nity?				
<ul> <li>How have t</li> </ul>	the services you have provided to the community impacted you?				
• What suggestion do you have for involving young people in community service in the future?					
3. A copy of your high school transcripts.					
Application Deadline					
All applicants must adhere to the Guidance Counselor deadlines. Guidance counselors must forward applications to Dickinson Area Community Foundation by March 15 <sup>th</sup> .					
Applicant Agreement and	d Signature				
By submitting this application, I affirm that the facts set forth in it are true and complete.					
•	tements, omissions, or other misrepresentations made by me				
on this application may result in rejection of this application.					
Name (printed) Signature					
Date					
	ation Form				
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:

I affirm that the statements above are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.

Signature of parent or guardian:

Date:

### **RELEASE OF INFORMATION**

I hereby certify that any information needed regarding my scholarship requirements be made available to the Director of the Dickinson Area Community Foundation and the James R. Petroff Memorial Scholarship Committee.

Signature of Applicant:	Date:	