

Gordon & Irma Johnson Scholarship Criteria

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

Criteria:

- 1. The recipient must be graduating senior of North Dickinson High School.
- The recipient must be entering a degree-granting program at a four-year postsecondary institution of higher learning and pursuing a career in an education or nursing field.
- 3. The applicant must have a GPA of at least 2.0 and have demonstrated the ability to do college-level coursework.
- 4. The applicant must write a paragraph which includes their comments on their selected field of study (education or nursing).
- 5. A transcript of the applicant's high school records must be provided.
- 6. 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 15th.
- 7. 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.



Gordon & Irma Johnson 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 admission?			
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: 1. Attach a personal statement which includes your comments on how your field of study relates to an education or nursing field. 2. Please include a transcript of your high school records. Application Deadline All applicants must adhere to the Guidance Counselor deadlines. Guidance counselors must forward applications to Dickinson Area Community Foundation by March 15th. Applicant Agreement and Signature By submitting this application, I affirm that the facts set forth in it 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.

Name (printed)

Signature

Date

Parent/Guardian Agreement and Signature:	
I affirm that the statements above are true and complete. I unde omissions, or other misrepresentations made by me on this app of this application.	-
Signature of parent or guardian:	
Date:	
RELEASE OF INFORMATION	
I hereby certify that any information needed regarding my schola available to the Director of the Dickinson Area Community Found Johnson Scholarship Committee.	
Signature of Applicant:	Date: