

APPLICATION FOR IDEAL SCHOLARSHIP FOUNDATION GRANTS

All information provided in the application will be held in strict confidence with the school counselor and the Ideal Scholarship Foundation Committee.

1. The applicant must be a graduating senior, who with **their family resides in the Township of Ideal**.
2. Applicant may apply for college, university, vocational, business school or specialty school.
3. Applicant must maintain a **minimum of 2.0 G.P.A. as a full time student** to be eligible for grants during the first year attending post-secondary education.
4. Scholarships awarded will be good for a period of **three years** following the date of high school graduation. (Expires in May of the 3rd year of graduation, i.e. May 2020 to May 2023.)
5. The scholarships will be paid upon the successful completion of a grading period of post-secondary school. Scholarships of \$2000 or more could be payable over a period of two years.
6. Applications must **be received** by the Foundation's Co-Chairman no later than **March 1**. Applications postmarked after March 1, will not be accepted. **No other paper work** needs to be sent other than the completed application. **It is recommended to send in the application as early as January.** Appointments are assigned for time of interview by April 1.
7. Personal interviews will be conducted on the last Tuesday in April. These interviews are **MANDATORY** and aid the Ideal Scholarship Foundation Committee in determining scholarship recipients.

8. **APPLICATIONS** should be **mailed to:** 35697 Pinedale Lane
Pequot Lakes, MN 56472

Or emailed to: idealscholarshipfoundation@gmail.com

(save the file before filling and submitting digitally)

TO OBTAIN PAYMENT of scholarships, **TRANSCRIPTS** should be mailed to:

IDEAL SCHOLARSHIP FOUNDATION
P.O. Box 422
Pequot Lakes, MN 56472

Or emailed to: idealscholarshipfoundation@gmail.com

IDEAL SCHOLARSHIP FOUNDATION

I will graduate from _____ High School in _____ 2024.

I hereby apply for a scholarship to attend _____
beginning _____, 2024

1. Name _____

Address _____ City _____ Zip _____

E-mail address _____ Phone # _____

Name of Parent or Guardian _____ Phone # _____

2. What is your grade point average? _____ Class ranking _____

3. Please list the school activities in which you have participated. Include any honors and special recognition.

4. Please list the Community activities in which you have participated. Include any honors and special recognitions.

5. What field of study are you planning to enter? _____

6. Write a paragraph describing your future career plans.

7. How long have you attended the high school you are graduating from? _____

8. How long have you been a resident of Ideal Township? _____

9. What are your personal interests and hobbies?

10. What Ideal Township Community Activities have you participated in?

I will accept the final decision made by the Ideal Scholarship Foundation Committee. I am aware that if I am awarded a scholarship, it will be payable after submitting a copy of my grades following grading periods.

Signature _____ Date _____