

Ishmael & Rose Diede Scholarship

Background:

Established with a gift from the estate of Ishmael Diede. This permanent endowment fund will be used to provide scholarships to high school students in Hettinger & Western Morton Counties, as well as community projects in both regions.

Both Ishmael & Rose graduated from Hebron High School in 1939. They were married in 1942, and together operated their own photo studio in Mott for 38 years, providing services to a wide area of southwestern North Dakota. Rose and Ishmael retired to Bismarck in 1985. Rose passed away in October 2005.

Ishmael wished to support the communities where he and Rose grew up and made their living. When Ishmael passed away in December 2011, he left a substantial legacy that will continue to support Hettinger & Western Morton Counties indefinitely.

Eligibility Requirements:

• Must be a graduating senior from Mott High School.

Return Completed Form by April 1 to:

Mott-Regent High School Counselor 205 Dakota Ave Mott ND 58646

Name of student:	DL Ni		
E-mail:			
Mailing Address:	State:Zip:		
Parent/Guardian (1):			
E-mail:			
Mailing Address:	State: Zip:		
Parent/Guardian (2):	-		
E-mail:			
NORTH DAKOTA COMMUNITY FOUNDATION	This scholarship is administered by the North Dakota Community Foundation. If you have any questions, please contact their main office in Bismarck at 701-222-8349.		

Ishmael & Rose Diede Scholarship Continued

Mailing Address:	State: Zip:
High School:	Phone Number:
Mailing Address:	State: Zip:
Principal Name:	CDA
Dest secondary school planning to attend	

Post-secondary school planning to attend:____ Planned Degree:_____

__ Major:_____

ACT Scores (American College Testing Program)					
Composite:	English: N	Iath: Reading:	Science:		
SAT Scores					
Composite:	Reading:	Math:	Writing:		

Career goals after post-secondary education:

Activities & special interests (work experience, honors, and other activities):

(Attach extra pages if necessary)



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Other than financial need why do you think you should receive this scholarship:

Statement of financial need: Many scholarship awards are based on financial need. The committee choosing the recipient must rely on the information in this application in order to make a wise choice. Please include any pertinent information to help the committee make a decision, such as: amount of any financial aid you may receive from your family, government student loans, number of siblings in college, special financial situation which may affect your ability to pay for college, government grants you may be receiving and other scholarships you may have already been awarded.

Number of Siblings Attending College:	
ment Grant:	
Loans:	
rship:	
rship:	

This form must be completed, signed and returned in order to be considered for a scholarship. Applications not accompanied by a current transcript will not be considered.

Signature of Student: _____

Date: _____



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