



Park River Scholarship

Background:

The Fund was established in 1994 by Larry Houser of the First United Bank of Park River and Claude Sheldon, Superintendent of the Park River Schools at the time the fund was established.

Eligibility Requirements:

- Each year the Park River Public School shall recommend a recipient for the award.

Return Completed Form by April 1 to:

Principal
Park River Area Public Schools
704 5th St W
Park River, ND 58270

Name of student: _____
 Permanent E-mail: _____ Phone Number: _____
 Mailing Address & City: _____ State: _____ Zip: _____

Parent/Guardian (1): _____
 E-mail: _____ Phone Number: _____
 Mailing Address & City: _____ State: _____ Zip: _____

Parent/Guardian (2): _____
 E-mail: _____ Phone Number: _____
 Mailing Address & City : _____ State: _____ Zip: _____

High School: _____ Phone Number: _____
 Mailing Address & City : _____ State: _____ Zip: _____
 Principal Name: _____ GPA: _____

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

Park River Scholarship Continued

ACT Scores (American College Testing Program)

Composite: _____ English: _____ Math: _____ 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)

Park River Scholarship Continued

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.

Family Support: _____	Number of Siblings Attending College: _____
Government Grant: _____	Government Grant: _____
Student Loan: _____	Other Loans: _____
Scholarship: _____	Scholarship: _____
Scholarship: _____	Scholarship: _____
Other Financial Information: _____	
Other Financial Information: _____	

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: _____



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.