

## **Leo D. and Mary C. Kalisiak Memorial Scholarship**

The Leo D. and Mary C. Kalisiak Memorial Scholarship is funded with monies from the Bowman Public School Foundation. This scholarship is offered to those students who have graduated from Bowman County High School and are in their sophomore, junior, or senior year at a two- or four-year institution.

It is the wish of the Kalisiak family that recipients of this scholarship demonstrate financial need. Students also need to carry at least a "C" average in their college studies. A college transcript showing grade point average must accompany this scholarship application.

The deadline for this scholarship application is July 15<sup>th</sup> of the current year. Recipients will be chosen by a scholarship committee made up of the Bowman County School staff.

This scholarship is a one-time award. Recipients will not be eligible to receive the scholarship a second time.

**Leo D. and Mary C. Kalisiak Memorial Scholarship**

Applicant must have attained the status of sophomore, junior, or senior at a 2 or 4-year institution. Applicant must have attained a college GPA of 2.0 or higher.

**Applicant Data:**

**Deadline: July 15**

Mr. \_\_\_\_ Ms. \_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DOB Month/Day/Year \_\_\_\_\_ Telephone# \_\_\_\_\_

Name of parent or guardian \_\_\_\_\_

Permanent mailing address of parent/guardian if different from the applicant

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent telephone# \_\_\_\_\_

**School Data:**

Graduation Date from Bowman County High School \_\_\_\_\_

Name of High School Principal \_\_\_\_\_

Name of post-secondary school attended \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Anticipated date of graduation from post-secondary program \_\_\_\_\_

Major field of study applicant plans to pursue \_\_\_\_\_

Applicant college GPA (must be 2.0 or higher) \_\_\_\_\_

**Please include an unofficial copy of your college transcript and mail to the selection committee at Leo & Mary Kalisiak Memorial Scholarship, c/o Bowman County High School, PO Box H, Bowman ND 58623.**

**Personal Data:**

List Scholarships and amounts received last year (attach a sheet if necessary).

Scholarships	Amount Received

Amount of Pell Grant received last year \_\_\_\_\_

Amount of State Grant received last year \_\_\_\_\_

Monies available in college fund started by parents, grandparents, or yourself \_\_\_\_\_

Approximate summer earnings projected for this summer \_\_\_\_\_

**Make a statement of your plans as they relate to your educational and career objectives and future goals.**

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**Please report any unusual family or personal circumstances you feel warrant attention.**

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Signature \_\_\_\_\_ Date \_\_\_\_\_