



## Timothy T. & Frances White Scholarship

### Background

Long-time Kidder County residents, Timothy T. and Frances M. White owned/operated gas stations, vehicle repair shops, a bulk oil business, and were partners in a number of business ventures that served Kidder County residents and communities. Fran worked for many years at the Steele Ozone. Tim and Fran valued hard work and their chosen trades. Over the years, they gave generously of their time and resources to individuals in need, and to Kidder County communities. The White's final wishes included endowments to many local causes. Among the most important was the establishment of this scholarship fund. Through their generous gift, Tim and Fran hoped to leave a legacy of perpetual support for their beloved Kidder County friends and neighbors.

### Eligibility Preferences

- Available to graduating seniors of the Kidder County School District #1. Award preference is given to students planning to attend a trade school. Students demonstrating financial need and sincere desire to acquire a trade profession shall be given first consideration.

Funds shall be paid directly to the chosen educational institution. Should the scholarship award exceed the student's educational expenses, including fees, room and board, materials, and tools, the excess scholarship funds shall be forfeited. Students receiving additional scholarships are required to inform the scholarship committee of the funding source and amount of the award.

Students who withdraw from an institution during the scholarship year, and do not enroll in a college or university during the next term, shall be obligated to repay the scholarship funds. Students who are expelled from the institution shall forfeit the scholarship and be required to repay the entire scholarship award. Institution refunds must be repaid directly to the scholarship fund.

### Return Complete Application by April 1, by mail or email, to

Chad Olson  
PO Box 463  
Steele, ND 58482-0463  
chad1done@gmail.com

Name of student: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian (1): \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian (2): \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

High School: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Principal Name: \_\_\_\_\_ GPA: \_\_\_\_\_

**Post-secondary school planning to attend:** \_\_\_\_\_  
**Planned Degree:** \_\_\_\_\_ **Major:** \_\_\_\_\_

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**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)

**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.

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

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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.*