



Y-W ELECTRIC ASSOCIATION, INC.

BOX Y • 250 MAIN AVENUE • AKRON • COLORADO 80720
 (970) 345-2291 • 800-660-2291 • Fax (970) 345-2154 • www.ywelectric.coop

Scholarship Application

1. Name		Home Phone	College Phone	
2. Permanent (street) address:		(city)	(state)	(zip)
3. Mother's Name:		Father's Name:		
4. High School name and address from which you graduated or will graduate this spring:				
5. ACTIVITIES, ACHIEVEMENTS, OR HONORS		<hr/> <hr/> <hr/> <hr/>		
Sending a resume' does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address, and name of this scholarship program should be included on all attachments.				
6. WORK EXPERIENCE		Describe your work experience (e.g. food server, babysitting, lawn mowing, and office work). Indicate dates of employment for each job and approximate number of hours worked each week.		
		Employer/Position	From-Mo/Yr	To-Mo/Yr
				Hours per Week
7. GOALS AND ASPIRATIONS		Write a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals. Use a separate sheet if needed.		
		<hr/> <hr/> <hr/> <hr/>		
8. GPA _____				
ACT: English _____ Math _____ Reading _____ Science _____ Comp _____ SAT I: Verbal _____ Math _____				
(Enclose backup for these scores)				
9. Name and address of accredited school you plan to attend in the fall of the year:				
		City _____	State _____	
		City _____	State _____	
<input type="checkbox"/> 4-yr College or University		<input type="checkbox"/> Vocational-Technical School	<input type="checkbox"/> 2-yr Community or Junior College	
10. What will your class status be in the fall of the year? <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior				
11. Major course of study:			Minors:	

12. ESSAY QUESTION (Required)	As part of the application, you are required to compose and submit an essay. The essay should be no more than one page, typed with a font size no smaller than 12 point, and double-spaced on 8½ x 11 paper. Include your name on the top right hand corner of the essay. <u>Student Essay Topic:</u> 1. How does the cooperative business model affect rural communities?
Student signature: _____	Date: _____

<h2 style="margin: 0;">Scholarship Submittal Requirements</h2>
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The student is responsible for submitting all materials on time.

INCOMPLETE APPLICATIONS WILL NOT BE EVALUATED.

- 1. Complete this application (attach additional sheets if necessary). Your name and address should be on all attachments.
- 2. Recent academic transcript whether it be from a high school, college, university, or trade school.

 CURRENT COLLEGE FRESHMAN - Judges will screen and require more than one semester or quarter of grades. If this applies to you, submit your high school transcript.
- 3. Copy of your college entrance examination (ACT and/or SAT) scores.
- 4. Essay
- 5. Applicant Appraisal.
- 6. Mail your complete application packet as directed below.

Y-W Electric Assn. Inc.
 P.O. Box Y
 Akron, CO 80720

The application deadline is: 5:00p.m. Monday February 1, 2019. Any applications that arrive later than February 1, 2019 will NOT BE CONSIDERED REGARDLESS OF POSTMARK.

You may also deliver completed applications to our office located at 250 Main Ave in Akron, Colorado.

APPLICANT APPRAISAL (REQUIRED)

To the Applicant: This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

The applicant's choice of a post secondary educational program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

Comments: Please feel free to attach a separate sheet.

Appraiser's Name _____ Title _____ Telephone () _____
 Signature _____ Organization _____ Date _____