**HENDRICKSON SCHOLARSHIP APPLICATION**

Established in Memory of

Lauritz and Marie Hendrickson & Darrel and Betty Hendrickson

**Applications due the last Monday in March.**

*(Shaded boxes fillable.)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | HS Grad Year |  |
|  | *First* | *Last* | *M.I.* |  |  |

|  |  |
| --- | --- |
| Current Address: |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | *City* | *State* | *ZIP Code* |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email:  |  |
|  |  |  | *(Not school email)* |

If you have decided on a post-secondary institution, please list:

|  |
| --- |
|  |

If not, list your top three choices:

|  |  |
| --- | --- |
| 1) |  |
| 2) |  |
| 3) |  |

|  |
| --- |
|  |

Number of total years attending Richland #44 High School:

|  |  |  |  |
| --- | --- | --- | --- |
| From: |  | To: |  |
| From: |  | To: |  |
| From: |  | To: |  |
| From: |  | To: |  |

**Please thoughtfully answer the following questions:**

*(You may submit on a separate sheet or use the fillable shaded boxes.)*

**1). How will receiving this scholarship make a difference in your future plans?**

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| --- |
|  |

**2). Who at Richland #44 was an important mentor/role model for you during your educational career and why?**

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| --- |
|  |

**3). What is your favorite memory of attending Richland #44?**

|  |
| --- |
|  |

**4). Describe volunteer activities you have participated in and what it meant to you.**

|  |
| --- |
|  |

Return application via email to richland44foundation@gmail.comor mail the application to the Richland #44 Foundation, PO Box 49, Colfax, ND 58018.

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