



All applicants must complete steps 1-3:

1. Complete this application page and the activities page.
2. Obtain and attach a copy of your high school record, which includes at least seven semesters of grades and all standardized test scores. **This does not have to be an official transcript.** If your ACT and/or SAT scores do not appear on your record, attach a copy of your scores as received from the College Board and/or ACT.
3. Return the completed application by April 1st to Mrs. Paulson.

Student Information:

First _____ MI _____ Last _____
 Permanent Mailing Address _____ Apartment _____
 City _____ State _____ Zip _____
 Date of Birth (MM/DD/YYYY) ____/____/____ E-Mail _____
 Social Security Number _____ - _____ - _____ Phone # (____) _____ - _____

High School Information:

High School Name _____ City _____ State _____
 Graduation Date (mm/YYYY) ____/____

Academic Information:

Please provide your High School information in the boxes below.

GPA	Class Rank	ACT-Composite	SAT-Critical Reading	SAT-Math	SAT-Written	Specify Number of			Graduation Date (MM/YYYY)
						Honors Courses	AP Courses	IB Courses	

College Information: Specify your first choice only.

State _____ Full College Name (Do not abbreviate) _____

EXTRACURRICULAR SCHOOL ACTIVITIES

List activities in which you have participated during the last three years (school clubs, student government, publications, varsity or club sports, theater arts, scouting, 4-H, etc.). Indicate the number of years involved in each activity. Please do not use acronyms. *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.*

Activity Description	Years Involved	Highest Position Held

COMMUNITY SERVICE

List community agencies or organizations in which you have participated WITHOUT pay during the last three years (religious groups, hospital volunteer, cultural activities, outreach programs, etc.) Indicate the total amount of hours in the past three years. Please do not use acronyms.

Volunteer Activities	Hours

WORK EXPERIENCE

List your work experience of the last three jobs you have held the longest (e.g. food server, babysitter, lawn mowing, office work, etc). Indicate the number of years spent on the job and an approximate number of hours worked each week.

Employer	Position	To-From Dates	Hours (average per week)

ESSAY

Your full name and social security number must be on the top left corner of each page. To be considered for this scholarship submit a typed essay of 500 words or less describing your career goals, and what part living in Clark, SD has played in your career choice.

APPLICATION CHECK LIST

You may use the following checklist to ensure the application process is complete.

All documents must be turned in together to be considered for this scholarship. Incomplete or late applications will NOT be considered.

- I have attached my application and activities form
- I have attached my high school record.
- I have attached copies of my ACT and/or SAT scores. (if not documented on high school record).
- I have attached my essay.
- I have photocopied my entire submission for my files.

CERTIFICATION

I certify, to the best of my knowledge, that the information on this application is complete and accurate. Falsification of any information will cause my disqualification from the scholarship competition.

I understand it is my responsibility to make sure this application is completed and delivered to Mrs. Paulson by the due date. Furthermore, I understand that if my application is not complete, or I do not submit my application by the due date, I may be disqualified from the scholarship competition and may not be considered for a scholarship.

To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, I hereby give permission for school officials to release my secondary school record and other requested information, if necessary.

GENERAL RELEASE

By submitting this application, you release the SD Community Foundation and Clark High School, its affiliates, its directors, trustees, officers, employees, agents, licensees and assigns from any liability whatsoever, and waive any and all causes of action, related to any claims, costs, injuries, losses, or damages of any kind arising out of or in connection with the scholarship or delivery, misdelivery, acceptance, possession, use of or inability to use the scholarship (including, without limitation, claims, costs, injuries, losses and damages related to personal injuries, death, damage to or theory of contract, tort, privacy, warranty or other theory.

Applicant's Signature _____ Date _____

Parent's Signature _____ Date _____

(if the student is under 18 years old)

EEO STATEMENT Scholarship recipients are selected on the basis are selected on the basis of academic record, demonstrated leadership and participation in school and community activities, honors, work experience, goals and aspirations stated in the application. Awards are granted without regard to race, color, creed, religion, age, gender, disability, national origin, sexual orientation, or other protected status.