

SOUTHEASTERN ELECTRIC COOPERATIVE Scholarship Program Submittal Requirements

- Complete this form by typing or printing (attach additional sheets if necessary).
- Enclose your most recent academic high school transcript.
- Enclose a short essay written by you outlining your high school honors, community service and school activities, your employment history, and future career goals.
- Enclose one letter of reference from a teacher, counselor, employer, or system manager.
- Enclose or email your senior photo or a current photo of yourself. Please write your full name on the back of photo and use <u>only photo quality</u> <u>paper</u>.
- Application must be signed by both the student and parent to be considered.
- If mailing, please send it to:

Scholarship Committee - Southeastern Electric 47077 276th St. Lennox, SD 57039

Applications must be received by **February 2, 2024**. Postmarked dates will not be accepted.

Applications can be delivered to any one of SEC's six offices by 4:30 p.m. on or before **February 2, 2024,** or can be scanned and emailed to todd@southeastern.coop.

QUALIFICATIONS: APPLICANT MUST BE A HIGH SCHOOL SENIOR. PARENT
OR GUARDIAN MUST BE A MEMBER OF SOUTHEASTERN ELECTRIC
COOPERATIVE

All scholarship entries are confidential and will only be viewed by a third-party selected by Southeastern Electric Cooperative. Applications will not be considered unless the above required information is complete.



SCHOLARSHIP PROGRAM APPLICATION

Please complete the required information below. Information provided in # 10-11 may be used for publicity purposes. Please print clearly			
1. Applicant Name and Phone cell #			
2 Dormanant Address	(city)	(state)	(-in)
2. Permanent Address:	(city)	(state)	(zip)
2 Appliant/s applied duese if a	المامون		
3. Applicant's email address if a	pplicable:		
4 Father/s		Mathau'a nana	
4. Father's name:		Mother's name:	
Applicant's parent or guardian must be a Member of Southeastern Electric Cooperative.			
5. (Required) Member Account #		Name on Account:	tric cooperative.
5. (Required) Member Account #		Name on Account.	
6 High School name and address from which you will graduate this enring.			
6. High School name and address from which you will graduate this spring:			
7. High school achievements or honors: (May attach additional information if needed)			
7. High School achievements of honors. (May attach additional information if needed)			
8. GPA			
GPA and academic transcripts are the only requirements. SAT/ACT, ACCUPLACER ARE NOT required.			
9. Name and address of accredited school you plan to attend in the fall of the year:			
3. Name and address of accredited school you plan to attend in the fail of the year.			
4-yr college or university		2-yr community or jur	nior college
Vocational-Technical School		Other, explain	
10. Major course of study:		Minors:	
10. Major course or study.		rinors.	
11.Career plans after school: (May attach additional information if needed)			
11. Career plans after school. (Play attach additional information if needed)			
Student signature:			Date:
Student signature.			Date.
Parent or Guardian Signature:			Date:
raient of Guardian Signature.			Date.
Applicants roturn this form to	Scholarship Committee	<u> </u>	
Applicants return this form to: Scholarship Committee Southeastern Electric Cooperative, Inc.			
	47077 276 th St.	ooperauve, Inc.	
or ome: tectodd	Lennox, SD 57058	adlina Caburrani 2, 202	<i>A</i>
or email to: todd@southeastern.coop Deadline February 2, 2024			