

**Alina Snell Memorial Scholarship Fund  
Crystal Falls Area Community Foundation**



**SELECTION CRITERIA**

***One (1) scholarship recipient will be chosen annually from Forest Park High School. Exact award amount is determined annually based upon earnings in Fund.***

**Eligibility:**

1. The student chosen must have been accepted in a 4-year program at a college or university.
2. The student's field of study must be in a curriculum leading to a degree: Earth Sciences (Geology, Hydrology, Minerology, Meteorology, etc.), Civil Engineering or Medicine.
3. The student must attach a Personal Statement which includes their comments on how their field of study will lead to a degree in the Earth Sciences (Geology, Hydrology, Minerology, Meteorology, etc.), Civil Engineering, or Medicine fields.
4. The student must be a graduating Forest Park High School Senior.
5. A transcript of the student's high school records must be supplied demonstrating the student is in the upper 25% academically of his/her graduating class and has obtained a 3.5 Grade Point Average (GPA).
6. All completed applications must be returned to the Guidance Office by March 15<sup>th</sup>.

**Addendum:**

A scholarship award may be revoked by the Board of Trustees because of:

- Criminal or anti-social conduct of recipient.
- Filing false information on application.
- For such other good cause as the Board may, in its sole discretion, determine.

Revocation shall be by the action of a majority of the members of the Board of Trustees, and upon such revocation, any and all funds still controlled by the Board of Trustees, shall be withheld and disposed of at the discretion of the Board.



***Alina Snell Memorial Scholarship***  
**Crystal Falls Area Community Foundation Fund**  
**an affiliate of the Dickinson Area Community Foundation**

<b>Date</b>	
<b>Full Name</b>	
<b>Street Address</b>	
<b>City State ZIP Code</b>	
<b>Home &amp; Cell Phone</b>	
<b>E-Mail (Required)</b>	
<b>GPA</b>	
<b>In what extra-curricular activities did you participate in? (Include both in-school activities and volunteer activities outside of school)</b>	
<b>Did you work during the school year?</b>	<b>If yes, how many hours/week?</b>
<b>Name of college or university you plan to attend:</b>	
<b>Have you applied for admission?</b>	
<b>Have you been accepted?</b>	
<b>Intended field of study:</b>	
<b>Have you applied for other scholarships?</b>	
<b>Have you been granted a scholarship? If so, name of scholarship &amp; amount:</b>	
<b>Please include the following with the application:</b>	
<ol style="list-style-type: none"> <li>1. Please attach a Personal Statement which includes your comments on how your field of study will lead to a degree in Earth Sciences (Geology, Hydrology, Mineralogy, Meteorology, etc.), Civil Engineering, or Medical Field.</li> <li>2. Copy of high school transcripts.</li> </ol>	



<b>Application Deadline</b>	
All applicants must adhere to the Guidance Counselor deadlines. Guidance counselors must forward applications to Dickinson Area Community Foundation by <b>March 15</b> .	
<b>Agreement and Signature</b>	
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.	
Name (printed)	
Signature	
Date	
<b>Parent Application Form</b>	
Name of parent or guardian completing this form:	
Home address:	
Phone:	
Email address:	
<b>Do you have any dependents other than your own family or other extenuating circumstances that should be considered? If yes, please explain:</b>	
<b>Note here any statements you may wish to make which assist the scholarship selection committee in consideration of the applicant:</b>	
<b>Agreement &amp; Signature:</b>	
I affirm that the statements above are true and complete. I understand any false statements, omissions, or other misrepresentations made by me on this application may result in rejection of this application.	
Signature of parent or guardian:	
Date:	



### RELEASE OF INFORMATION

I hereby certify that any information needed regarding my scholarship requirements be made available to the Director of the Dickinson Area Community Foundation and the Alina Snell Memorial Scholarship Committee.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_