

Donald & Jean Boulanger Scholarship

Crystal Falls Area Community Foundation an affiliate of the Dickinson Area Community Foundation

The Founding Contributors will determine the amount of the scholarship and how many scholarships shall be awarded each year. Exact award amount available is determined annually based upon earnings of the Fund.

Scholarship Criteria:

- 1. The scholarship is available to graduating Forest Park seniors and non-traditional students from the Crystal Falls area who have been out of school and are returning to school.
- 2. Applicants must show proof they are enrolled in their program of choice before the scholarship is awarded.
- 3. Applicants must be pursuing certification in a marketable trade that is obtainable in two years or less. Certification may be in a program such as, but not limited to, the following: welding, auto mechanics, machine tool, electrical, health care, dietary, or agriculture.
- 4. Applicants must have demonstrated a degree of work ethics in high school and the community.
- 5. GPA may be used as a determining factor, but more emphasis shall be placed on whether the applicant has a firm foundation in the area related to his/her training.
- 6. Applicants must submit an essay in 12-point font, double-spaced, and not more than one page on how they have demonstrated their work ethic in school and the community, what made them choose the vocational or trade program they are entering, and how this scholarship will help them meet that goal.
- 7. All applicants must adhere to Guidance Counselor deadlines. Failure to turn in a complete application by the due date will result in the student being ineligible to apply for this scholarship. Guidance Counselors: all completed applications must be returned to Dickinson Area Community Foundation by March 15.
- 8. A scholarship award may be revoked by the DACF Board of Trustees because of:
 - Criminal or anti-social conduct of recipient.
 - Filing false information on the scholarship application.
 - Failure to provide the Dickinson Area Community Foundation with documents and verification as specified in the Foundation's established policies.
 - 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 DACF 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.



Donald & Jean Boulanger Scholarship Crystal Falls Area Community Foundation Fund

an affiliate of the Dickinson Area Community Foundation

Date			
First and Last Name			
Street Address			
City ST ZIP Code			
Home & Cell Phone			
GPA			
E-Mail Address:			
What extra-curricular and community service activities did you participate in? Include in-school activities and activities outside of school. List position held, if applicable:			
Did you work during the sc	hool year?	If yes, how many hours/week?	
Name of Vocational / Technical / Trade college you plan to attend:			
Have you applied for admission?			
Have you been accepted?			
Intended field of study:			
Have you applied for other scholarships?			
Have you been granted a scholarship? If so, name of scholarship & amount:			

Please include the following with the application:

- 1. One page essay, using 12-point font, double-spaced, demonstrating work ethic in school and in the community and what made you choose the vocational or trade program you are entering. Please also explain how this scholarship will help you meet that goal.
- 2. A copy of your high school transcript.
- 3. Letter of acceptance from the vocational or technical school prior to award.

Application Deadline

All applicants must adhere to the Guidance Counselor deadlines. Guidance counselors must forward applications to Dickinson Area Community Foundation by March 15.

Applicant Agreement and Signature

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

Parent Application Form

Name of parent or guardian completing this form:	
Home address:	
Phone:	

Do you have any other dependents or other extenuating circumstances that should be considered? If yes, please explain:

Please note here any additional information which may assist the scholarship selection committee in consideration of the applicant:

Parent/Guardian Agreement & Signature

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 Donald & Jean Boulanger Scholarship Committee.

Signature of Applicant:_____ Date:_____