

Missouri Basin Power Project Scholarship Program Application



Please complete the form below.

Applicant Information								
Applicant Name:	Home Phone:	Colleg	e Phone:	Phone: Last 4 Digits of SSN		s of SSN#:		
Permanent Address (Street/PO Box):	City:	State:	Zip:	Email:				
High School Name and Address from which you graduated or will be graduating this spring:								
Participation in school and community act								
If space provided in any section is inadequate, you may continue on additional sheets. Your name, address, and name of this scholarship program should be included on all attachments.								
Work Experience Describe your work experience (e.g. food server, babysitting, lawn mowing, and office work). Indicate dates of employment for each job and approximate number of hours worked each week.								
Employer/Position			rom Io/Yr)	To (Mo/Yr)	Hours per Week			
Goals and Aspirations Write a brief summary of your plans as they relate to your educational and career objectives and longterm goals.								

Education							
An unofficial transcript must be included with this application.							
GPA:							
School							
Name and address of Vo-tech or trade school you plan to attend in the fall of this year:							
Name	City	State					
Essay Question (Required)							
Describe your local Electric	Cooperative.						
(Applicant Signature)	(Date)						

Applicant Appraisal (Required)						
Include a written recommendation from someone involved in the field you are pursuing.						
Appraiser's Name:	Title:	Organization:	Phone No.:			
(Appraiser Signature)		(Date)				

Return completed form by March 1, 2020 to:

klittlesoldier@bepc.om

or

Basin Electric Power Cooperative Attn: Karsen Little Soldier 1717 E Interstate Ave Bismarck, ND 58503

Any questions, please call Karsen Little Soldier at 701-557-5513 or klittlesoldier@bepc.com