

Fall River Rural Electric Cooperative, Inc.

2024 Scholarship Application for High School Seniors

1.	Name of Applicant:					
	La	ıst	First		M.I.	
2.	Address: Mailing Address	s	City	State	Zip Code	
3.	Cell Phone No.:		E-mail:			
4.	Date of Birth:		-			
5.	High School Attending:		H.S. Gl	PA: Class]	Rank:of	
6.	Awards or Honors Receive	ed:				
7.	Activities in school and community:					
8.	Work: List employer, position, number of hours worked weekly, and if the job was during school year or summer.					
9.	Parent/Guardians Name:					
	Cell Phone #:	Cell Phone #: Email Address				
10.	From a financial standpoint what impact would this scholarship have on your education?					
11.	Essay: Please see the essay instruction form on our website http://www.fallriverelectric.com/					
12.	You may include up to two letters of recommendation from individuals who know you scholastically or personally which may include; teachers, coaches, clergy, neighbors, or friends					
			ON NO LATER T r application and			
Applicants' Signature:			Date:			
Parent/Guardian Signature: *Signature gives Fall River permission to publish			Data			
*Signat	Return Applications to:	Board Scholarship	_			

If you have any further questions, please call Angie Haws at (208) 652-7431 or e-mail angela.haws@fallriverelectric.com

angela.haws@fallriverelectric.com

Ashton, ID 83420 or email to: