

# BERTHOLF FAMILY SCHOLARSHIP FUND

## SCHOLARSHIP DESCRIPTION:

\$2,000 scholarship - The first half (\$1,000) will be awarded in August for the fall semester and the second half (\$1,000) will be awarded in January for the spring semester.

To receive the second half of the scholarship, the recipient must be a full-time student in good standing and submit the fall semester's records.

Each payment will be mailed directly to the college financial aid office where it will be credited to the recipient's account.

## APPLICATION REQUIREMENTS:

**Application and accompanying documents are due to HCCF no later than April 1<sup>st</sup>.**

Applicant must have graduated from a high school located in Harper County.

Applicant must have maintained at least a 2.0 cumulative grade point average.

Applicant must provide:

1. A copy of the proof of admissions letter.
2. A list of high school and community activities.
3. A 200 words or less narrative outlining educational goals and reason for seeking this scholarship.
4. Two letters of recommendation.
5. A copy of the high school transcript with ACT score.

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

College Choice: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State ZIP Code: \_\_\_\_\_

Number of Brothers: \_\_\_\_\_ Ages: \_\_\_\_\_

Number of Sisters: \_\_\_\_\_ Ages: \_\_\_\_\_

Number of siblings who will be attending college full-time during the same time period for which this application is being submitted: \_\_\_\_\_

Do you plan on finding employment during the school year?      YES      NO

If yes, how many hours per week?      5      10      15      20

List all confirmed scholarships, tuition waivers, and financial aid you will be receiving during the same period of time for which this application is being submitted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_