

# Scholarship Application

Name:	Date of Birth:		Gender:
Street Address:			
High School Attended:	Date of Gi	aduation: _	
HCTC Telephone Number:	Social Security N	umber:	
Father's Name:	Mother's Name:		
Current Grade Point Average:			
1. What high school academic awards have you red	ceived?		
2. List any extra-curricular school-related activities well as, any honors you received based on your part	•	d positions	of leadership you held, as
3. List any community activities (not connected wi offices and positions of leadership held, as well as,		•	
4. Are you presently employed? Yes / No If so List any employment experiences you have had du		summer br	reaks.
5. Which college or university will you be attending	ng?		
6. Why do you feel Hamilton County Telephone C	o-op should award ve	ou with a sc	cholarship?



# Scholarship Application

## Dear Applicant:

This application is for Hamilton County Telephone Foundation Scholarship. There is also a .pdf version available on our website www.hamiltoncom.net/foundation.php. The scholarship amount will depend upon availability of funds and the number of applications received.

#### Eligibility Requirements:

- 1. Be a high school senior or already attending a post-secondary school.
- 2. Be enrolled in fall classes at a post-secondary school.
- 3. Student, parent(s) or legal guardian must be a current member of Hamilton County Telephone Co-op.

## Applications should include:

- 1. Typed essay explaining the importance of cooperatives in our community.
- 2. A copy of high school transcript.
- 3. Hamilton County Telephone Co-op Scholarship Application

#### Application Deadline:

Application must be received no later than March 15, 2023. They can be mailed to:

Hamilton County Telephone Foundation Attn: General Manager P.O. Box 40

Dahlgren, IL 62828

Thank you for your interest in Hamilton County Telephone Foundation's scholarship program. Recipients will be selected by April 24, 2023.