



# Mustang Boosters Scholarship Application

**Application Deadline: April 3, 2021**

This application will be used to determine your eligibility for a \$500 Mustang Boosters Scholarship. Scholarship funds must be used for post-secondary education. Scholarship eligibility requirements are as follows:

- Student must be a senior at Sheyenne High School;
- Student's parent/guardian must be a member of the Mustang Boosters, and in good standing, as of January 1 of the student's graduation year;
- Student must complete the application, including an essay, and deliver to the Mustang Boosters prior to the application deadline.

## APPLICANT DATA:

Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Post-secondary school for which applicant's scholarship is requested:

School Name: \_\_\_\_\_

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

Student will be enrolled full time:    \_\_\_ yes    \_\_\_ no

Anticipated graduation date from post-secondary school: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_



List all school and community activities you have participated in during the past 4 years. Briefly describe experiences gained, leadership positions held, and any awards/honors received. If necessary, continue on a separate sheet.

Activity	Number of Years Involved	Experiences/Positions/Awards/Honors

List all paid work experiences in the past 4 years. If necessary, continue on a separate sheet.

Employer Name	Position Held	Employment Dates	Hours per week



**ESSAY: What are your educational and career goals?**



**Certification and Permission to use "Recipient Information" to Announce Scholarship Winners:**

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information will result in termination of any scholarship granted.

I agree, if I am awarded and accept a scholarship, the Mustang Boosters may use my name, my photograph, the name of my high school, the amount of the scholarship award, and the name of the post-secondary institution I will attend in press releases, public announcements, and other fundraising or promotional materials in any media form (i.e. Internet, social media, newspaper, etc.) to advance the non-profit objectives of the West Fargo Sheyenne Mustang Booster Club.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed application to:**

**West Fargo Sheyenne Mustang Boosters  
P.O. Box 511  
West Fargo, ND 58078**

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