CAVALIER/PEMBINA COUNTY 49er SHRINE CLUB BOB MOSTAD MEMORIAL SCHOLARSHIP

NAME: The name of the scholarship is the Bob Mostad Memorial Scholarship

PURPOSE: The purpose of this scholarship is to provide a source of financial

assistance for I student from Cavalier County and 1 student from

Pembina County who will be attending a non-4 year institution their first

year of post-secondary education.

INCLUDES: The scholarship will be for \$1000.00 and will be paid to the institution

directly upon completion of student's first semester and enrollment in

their second semester.

ELIGIBILITY: Students eligible for this scholarship will:

1. Have attended a high school in Cavalier or Pembina County

2. Complete entire application

3. Be enrolled in a qualifying post-secondary institution (trade or

2-year)

The scholarship is based primarily on need, with scholastic achievement,

leadership, extracurricular activities and moral character secondary

concerns.

IF USING THIS FORM PLEASE WRITE ALL ANSWERS LEGIBLY

CAVALIER/PEMBINA 49er SHRINE CLUB/BOB MOSTAD MEMORIAL SCHOLARSHIP APPLICATION

First Name	Middle Initial	Last Name
Home Address		
Current School	School A	address
Home Phone	School Phone_	
Parents Name		
Birth Date (MM/DD/YY)		HS GPA
College or Institution attendi	ng:	
Major or field of study:		
Student ID if known:	ent ID if known: Last 4 digits of SSN	
1. Reason for applying for	Reason for applying for this scholarship	
2. Other scholarships red	Other scholarships received and dollar amounts of scholarships	
3. Why did you choose y	3. Why did you choose your current major?	
- 		

4.	What are your plans upon completion of your Post-secondary program?		
5.	List all extra-curricular and other activities you were involved in during your High School		
	years (school and non-school)		
	SIGNATURE DATE		

Completed Application should be submitted by April 15 to:

Bob Mostad Memorial Scholarship c/o Lee Beattie PO Box 82 Neche, ND 58265