

KROFAM, INC. SCHOLARSHIP
\$100 per semester for EIGHT semesters (\$800 total)
(renewable for a maximum of 8 semesters)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Parent/Guardian: _____

Address(if different from above): _____

Name of High School attended: _____

Graduation Date: _____

Name of college or vocational school: _____

Intended major or area of interest: _____

Criteria to apply:

1. Attending or planning to attend a South Dakota post-high school educational institution.
2. A current graduate of Philip High School.
3. A GPA of no less than 2.5 while in high school.

Please attach:

1. Letter of acceptance from college or vocational school.
2. High School transcript.
3. Personal Data sheet listing activities in school, church and community. Include leadership positions, recognitions and honors received in high school.
4. A brief (200 words or less) essay, regarding what you are planning to study and what you plan to do once you have completed your post high school education.
5. Two letters of reference.

PLEASE COMPLETE THIS APPLICATION AND RETURN BY APRIL 1 TO:

Krofam, Inc.
Scholarship Selection Committee
PO Box 850
Philip, SD 57567