



# First Year Full-Time Student Scholarship Application

for students attending  
Minnesota State Community and Technical College-Detroit Lakes

Please submit completed application by March 1, 2010 to:

Student Services Office  
Minnesota State Community and Technical College  
900 Highway 34 East  
Detroit Lakes, MN 56501

For more information, please call 218-846-3700 or toll free 1-800-492-4836.

***Students may apply in all categories.  
Only one scholarship will be awarded per student.***

Minnesota State Community and Technical College is a member of the Minnesota State Colleges and Universities System.  
An Equal Opportunity Educator/Employer; Un Educador/Empleador De Oportunidad Igual.

If you use a TTY, please call by using the Minnesota Relay Service at (651) 297-5353 or 1-800-627-3529 and ask them to place a call to Minnesota State Community and Technical College. Upon request this information is available in alternative formats.



## ***First Year Full-Time Student Scholarship Application Process***

All applicants for the First Year Full-Time Student Scholarship must complete the Detroit Lakes Area College Foundation First Year Full-Time Student Scholarship application in its entirety (pages 3-5 of this packet).

Attachments required along with the completed application:

### **1. Two letters of recommendation:**

- Two written by high school teachers and/or staff members (at least one recommendation must be written by a teacher).
- One written by an individual who knows you well outside of the school environment (an employer, a pastor, etc.). This should not include friends or family.

Please note: These letters of recommendation are to be sent in a sealed envelope directly from the person writing the letter to the Student Services Office in order to keep the information confidential. Please mark on the envelope that it is a "Scholarship Reference for (student name)."

### **2. An original, typewritten and double-spaced essay:**

No more than 300 words in length as described on page 5.

### **Criteria used in selecting Scholarship recipients:**

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1. Current college GPA of 3.0 or better, or indication of work to date at B level.
2. High School academic record
3. Letters of recommendation
4. High school and community involvement
5. Original essay

### **Expectations of Part-Time Scholarship recipients:**

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1. Maintain a 3.00 GPA throughout the academic year of the award.
2. Participate in events on campus and throughout the neighboring community.
3. Communicate the M State story to the people in our area; be a spokesperson on behalf of M State-Detroit Lakes.
4. Must be a full-time student at M State-Detroit Lakes during the next academic year.



## First Year Full-Time Student Scholarship Application

This application is provided for first year full-time students at M State-Detroit Lakes to apply for a Detroit Lakes Area College Foundation Scholarship. You must be a first year full-time student (**enrolling in 12 credits or more per semester**) at M State-Detroit Lakes for the upcoming school year to receive the scholarship. Awards are based on academic achievement, evidence of leadership ability, a typewritten essay, and your responses to the questions on page 4.

Please type or print neatly using black or blue ink.

**Application Deadline:** All applications must be postmarked or returned to M State-Detroit Lakes Student Services by **March 1, 2010**.

Scholarship recipients will be notified of their award by mid-March.

### Personal History:

Name: \_\_\_\_\_  
Last First Middle Maiden

Address: \_\_\_\_\_  
Street/PO Box/RR

\_\_\_\_\_ City State Zip

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Birth date: \_\_\_\_\_

### High School Verification:

Name of High School: \_\_\_\_\_ High School Graduation Year \_\_\_\_\_

Have you enrolled at M State-Detroit Lakes as part of the Post-Secondary Education Options program?

\_\_\_yes \_\_\_no

The following information must be completed by a counselor or principal at your high school, if you are currently attending high school:

Applicant ranks _____ (from top) in class of _____ students.	
Applicant's GPA at end of the first half of senior year _____.	
ACT Composite Score _____.	
_____	_____
Signature of high school counselor or principal	Date

**Participation:**

List school activities/organizations in which you have been active in during high school and indicate leadership positions you have held, special honors and/or outstanding achievements you have received.

\_\_\_\_\_

\_\_\_\_\_

List community activities/organizations in which you have been active in and indicate leadership positions you have held, special honors and/ or outstanding achievements you have received. Include internships, service learning projects, volunteer work and/or community service involvement.

\_\_\_\_\_

\_\_\_\_\_

**Work Experience:**

If you are currently employed, briefly describe your job position and related leadership responsibilities. Please include the approximate number of hours worked per week.

\_\_\_\_\_

\_\_\_\_\_

**Educational Plans:**

Name the major or course of college study you plan to pursue: \_\_\_\_\_

\_\_\_\_\_

Why did you choose M State-Detroit Lakes and how does it fit in your long-range educational goals:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Essay:**

Please respond to the following in a typewritten essay of no more than 300 words in length.

For this part of the application describe a challenging experience in your life that led to a significant learning opportunity for you. You may want to consider a choice you had to make, a fear or adversity you have overcome, or any other appropriate topic.

**Attach this essay to your application.**

**Verification:**

I understand that to receive a scholarship I must take a minimum of 12 credits more each semester. I certify that the information on this application is true and correct. I give permission to the M State-Detroit Lakes Student Services Office to submit a copy of my transcript to the Detroit Lakes Area College Foundation Scholarship Committee for the purposes of administering the scholarship process. I authorize Detroit Lakes Area College Foundation to publicize and promote my potential scholarship award and agree to be present at the scholarship award ceremony to be recognized as a recipient.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Minnesota State Community and Technical College  
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Detroit Lakes, MN 56501*