



Robert C. Peske Memorial Scholarship

Background:

The fund was established in 1990 in memory of Robert C. Peske who was the owner of Noble Insurance Adjustment and was the manager of Community Homes of Bismarck. Although he did not play a musical instrument, he loved music and dreamed of becoming a musician. According to his family, he did not miss a single Bismarck High School Band Concert.

Eligibility Requirements:

- The scholarship will assist a graduating senior who is a member of the Bismarck High School Stage Band.
- The recipient will be chosen for outstanding contributions to the Stage Band, both musically and for the extra effort which has inspired others for the betterment of the Stage Band.
- Selection will be through a secret ballot by the members of the BHS Stage Band.

Return Completed Form by April 1 to:

Principal of Bismarck High School
800 N 8th St, Bismarck, ND 58501

Name of student: _____

E-mail: _____ Phone Number: _____

Mailing Address: _____ State: _____ Zip: _____

Parent/Guardian (1): _____

E-mail: _____ Phone Number: _____

Mailing Address: _____ State: _____ Zip: _____

Parent/Guardian (2): _____

E-mail: _____ Phone Number: _____

Mailing Address: _____ State: _____ Zip: _____

High School: _____ Phone Number: _____

Mailing Address: _____ State: _____ Zip: _____

Principal Name: _____ GPA: _____

Post-secondary school planning to attend: _____

Planned Degree: _____ Major: _____

Robert C. Peske Memorial Scholarship Continued

ACT Scores (American College Testing Program)

Composite: _____ English: _____ Math: _____ Reading: _____ Science: _____

SAT Scores

Composite: _____ Reading: _____ Math: _____ Writing: _____

Career goals after post-secondary education:

Empty box for career goals after post-secondary education.

Activities & special interests (work experience, honors, and other activities):

(Attach extra pages if necessary)

Empty box for activities and special interests.

Robert C. Peske Memorial Scholarship Continued

Other than financial need why do you think you should receive this scholarship:

Statement of financial need: Many scholarship awards are based on financial need. The committee choosing the recipient must rely on the information in this application in order to make a wise choice. Please include any pertinent information to help the committee make a decision, such as: amount of any financial aid you may receive from your family, government student loans, number of siblings in college, special financial situation which may affect your ability to pay for college, government grants you may be receiving and other scholarships you may have already been awarded.

Family Support: _____	Number of Siblings Attending College: _____
Government Grant: _____	Government Grant: _____
Student Loan: _____	Other Loans: _____
Scholarship: _____	Scholarship: _____
Scholarship: _____	Scholarship: _____
Other Financial Information: _____	
Other Financial Information: _____	

This form must be completed, signed and returned in order to be considered for a scholarship.
Applications not accompanied by a current transcript will not be considered.

Signature of Student: _____ **Date:** _____