Thomas Whelan Memorial Scholarship

Background:

The Thomas Whelan Memorial Scholarship was established in 1984 in Memory of Thomas Whelan who was a prominent potato farmer, a former Ambassador to Nicaragua, and a longtime member of the American Legion.

Eligibility Requirements:

- Graduating senior from St. Thomas High School
- Has the highest grade point average and plans on continuing studies after high school
- Submit a transcript

Return Completed Form by April 1 to:

Principal of St. Thomas High School
St. Thomas Public Schools
375 Heritage Street
St. Thomas, ND 58276

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:_____

*This scholarship is administered by the North Dakota Community **Foundation. If you have any questions, please contact their main office** in Bismarck at 701-222-8349.*

Post-secondary school planning to attend:_____
Planned Degree:_____ **Major:**_____

ACT Scores (American College Testing Program)

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

SAT Scores

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

Career goals after post-secondary education:

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

(Attach extra pages if necessary)

NORTH DAKOTA COMMUNITY FOUNDATION

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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:** _____

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