



Kirstin Skari Memorial Scholarship

Background:

The Fund was established by Dave and Arlyss Skari in loving memory of their daughter Kirstin who passed away on July 10, 1999 from viral meningitis and encephalitis. She had just completed her Freshman year at the University of North Dakota.

Kirstin was born on September 25, 1979 in Bismarck and moved to Jamestown at the age of three. In 1993 she moved with her family to Minot. During high school she was a member of the National Honor Society, Key Club and Spanish Club. She was named an All American Scholar by the United States Achievement Academy.

Kirstin earned two varsity letters as a member of the golf team and participated in the Minot High School Girls Tennis Team. She played clarinet in the Minot High School Band and took piano lessons for twelve years earning three Gold Cups for superior ratings in piano festivals. She was active in the Christ Lutheran Church youth group, handbell choir and the woodwind ensemble. She twice attended the International Music Camp. She traveled to Europe with the Humanities Club and also to Close-up in Washington, DC. She traveled to 18 states including Hawaii with her parents on family vacations.

Kirstin was a Communications and Political Science Major and had planned to study law. She was a member of the Phi Eta Sigma and Alpha Lambda Delta honor societies. She participated as a member of the Student Association, Greek Panhellenic Council and served on the 1999 Elections Committee. She was Historian for the Alpha Chi Omega Sorority.

Although Kirstin's life was tragically short, her accomplishments were many and she touched many lives with her beautiful blue eyes, gleaming smile and her kindness.

Eligibility Requirements:

- Sophomore and junior members of the Alpha Chi Omega Sorority at the University of North Dakota may apply.
- Preference will be given to students who exhibit leadership skills, have stellar academic records and participate in campus activities.
- All applicants must write a short essay describing why they are qualified to receive this award. The essay must accompany the application in order to be considered for the award.

Return Completed Form by April 1 to:

Coordinator of Greek Life, University of North Dakota, Grand Forks, ND 58205. Phone #701-777-3667.

Kirstin Skari Memorial Scholarship Continued

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:** _____

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)

Kirstin Skari 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:** _____