

# PRAIRIE ROSE MINNESOTA

## COMMUNITY FUND

### *Scholarship Application Form*

The Prairie Rose Community Fund, a community fund supported by the Prairie Rose Wind Project, considers higher education vital to the creation and support of sustainable communities. To that end, every year the Prairie Rose Minnesota Community Fund grants up to 25% of its annual funding in the form of scholarships.

Applications must be received by March 20, 2024 and recipients will be announced on April 2, 2024.

The scholarship award committee is made up of individuals that serve on the Board of Directors of the Prairie Rose Minnesota Community Fund. The scholarship award committee will evaluate each application based on grades, work experience, school activities, volunteer community service and a personal essay.

If a scholarship is awarded, it will be paid directly to the college or school the scholarship recipient is attending. The scholarship must be applied to the second semester of the first year of attendance. Scholarship applications are limited to no more than 4 times. To be eligible for the MN Prairie Rose **Scholarship applicants must meet two of the following four criteria:** (Please check which two categories qualify you as an applicant.)

1. Be a resident of Rose Dell, Denver, or Springwater townships, the City of Hardwick or the portion of Jasper located in Rock County, Minnesota.
2. Be a landowner or a child of a landowner in Rose Dell, Denver or Springwater Townships, the City of Hardwick or the portion of Jasper located in Rock County, Minnesota.
3. Be a graduate of a local high school. Name of school: \_\_\_\_\_
4. Non-traditional students must reside in Rose Dell, Denver or Springwater Townships, The City of Hardwick or the portion of Jasper that is located in Rock County, Minnesota.

No Prairie Rose Wind Farm employees, members of the Board of Directors of Prairie Rose Minnesota Community Fund or the family members of any of these people, are eligible for scholarships.

The Prairie Rose Minnesota Community Fund does not discriminate on the basis of race, gender, religion, national origin, sexual orientation, political belief, disability, veteran status, age, and all other categories protected by state or federal law.

### *Applicant Data*

Please, write in block letters, type or print all information (except signatures).

Complete the entire application form and include all supporting documents as requested.

Name	
Address	
Phone	
E-mail	

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### *Extracurricular Activities*

List all extracurricular activities in which you have participated in high school (e.g., music, sports, student government, etc.). Any special recognition you have received for these should be indicated as well.

No. of Years Participated	Position Held	Description of Activities

### *Work Experience*

Describe your work experience.

Dates	Position Held	Description of Activities

### *Higher Education Plans*

Intended major or area of interest: \_\_\_\_\_

Date planning to attend      Fall \_\_\_\_\_      Spring \_\_\_\_\_

List the post-secondary institutions to which you have applied:

#	College Name	Type *

\*Type: vocational/technical, community college, four year university or other

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### *Additional Documents to be Submitted*

Please provide the following documents together with this completed application form:

- At least one written personal recommendation (other character reference) from a teacher, administrator, employer or counselor in a sealed envelope.
- Graduating High School seniors submit official high school transcript in a sealed envelope from your school.

### *Certification*

In submitting this application, I certify that the information I have provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of the information I have given in this form. Falsification of information may result in termination of any funding granted and legal action may be pursued.

I acknowledge that decisions made by the representatives of the Prairie Rose Minnesota Community Fund are final. I agree that, if I am offered and I accept funding, I will provide proof of use of funds.

I agree to allow Prairie Rose Minnesota Community Fund to use my name, photograph or likeness, the name of my community, and my name and the amount of the award, as well as the name of my school (with the school's permission), in press releases, public announcements, and other fundraising or promotional materials in all media (including the internet), to advance the non-profit objectives of the Prairie Rose Minnesota Community Fund.

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

Parent/Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

If student is under 18 years of age Parent/Guardian signature is required:

Parent/Guardian name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SEND THE COMPLETED APPLICATION FORM AND SUPPORTING DOCUMENTS BY MARCH 20, 2024 TO THE PRAIRIE ROSE MINNESOTA COMMUNITY FUND BOARD OF DIRECTORS, PO Box 196, HARDWICK, MN 56134 FOR INFORMATION, PLEASE, CONTACT: [lornabryan@alliancecom.net](mailto:lornabryan@alliancecom.net)**