

Sioux Falls Sister Cities Association
“*Sister City*” Scholarship Program

1. DEADLINE for scholarship applications is March 3, 2017 (no exceptions).
2. Refer to criteria below for eligibility requirements.
3. Refer to application process below for a list of the supporting documents needed (i.e., reference forms, evidence of GPA, etc.) Incomplete applications will not be considered.
4. If any question does not apply to you in this application please put N/A in the space.
5. Type or print clearly, illegible applications will be returned to you. You may also download a copy of the application online at www.sfsistercities.com/support
6. **Scholarship awardee must attend a Sister Cities monthly meeting afterwards and talk about the trip and volunteer for our yearly Germanfest.**
7. If you have any questions about the application, please send a notice to email@sfsistercities.com.

NOTE: Scholarship funds will be awarded to the student upon evidence of registration in an approved exchange program with either Potsdam, Germany or Newry-Mourne, Ireland. Scholarship is rewarded to Sioux Falls residence traveling to a partnered city. Funds are restricted from financing an individual traveling to Sioux Falls.

Purpose: To provide scholarships to deserving Sioux Falls School District high school graduating seniors or Sioux Falls College students. Participating in a high school supervised exchange program OR a Sioux Falls college student interested in pursuing post-high school courses of study at either college/university or other post-secondary educational institutions in the cities of Potsdam, Germany or Newry-Mourne, Ireland.

Award Components: Scholarships will be awarded to students selected by the Sioux Falls Sister Cities Board of Directors.

Criteria:

1. Applicant must be attending school in the Sioux Falls School District or a college of higher education in Sioux Falls, South Dakota.
2. Applicant must be currently enrolled and in good academic standing with a college of higher education in Sioux Falls.
3. Applicant **must demonstrate positive-impact involvement with their school or community involvement** which will be determined through letters of recommendation.

Application Process:

Applicant must submit the following items:

1. Completed application form (if handwritten, please print legibly)
2. Letter of application addressed to the Scholarship Committee. The letter should contain a brief explanation of scholarship goals and biographical (background) information.
3. Three (3) letters of recommendations from choice of high school teachers, administrators, counselors, employers, or individual with significant knowledge of applicant’s experience and involvement.
4. Scholarship awardee must attend a Sister Cities monthly meeting afterwards and talk about the trip and volunteer for our yearly Germanfest.
5. Personal Essay. In your essay, please answer the question on the enclosed essay form.

How would you make a positive difference in the Sioux Falls community through an exchange program?

Deadline for the application is **March 3 2017**. Applications postmarked after this date will not be considered.

Please mail OR submit application in person to:

Sister Cities Association
PO Box 89301
Sioux Falls, SD 57109-9301

Please **type** or **print** your answers. If application is illegible it will be returned to you.

1.	Last Name:	First Name:			
2.	Mailing Address::				
	Street: _____				
	City:	State:	ZIP:		
3.	Daytime Telephone Number: ()				
4.	Date of Birth:	Month	Day	Year	
5.	Current/Past High School:				Number of years attended:
6.	I am currently attending: _____				
	Proof of current student enrollment for the above school is required prior to receipt of funds.				
7.	I am attending the above-mentioned school as a: (Circle one)				
	High School Senior	College:	Freshman	Sophomore	Junior Senior
8.	Grade Point Average (GPA): _____ (On a 4.0 scale)				
	Attach proof of GPA. Your most recent official school transcript required.				
9.	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space.				
	Name (s) _____				
	Street: _____ City: _____ State: _____ ZIP: _____				
	Home phone of parents or legal guardians:				
10	Name and city of other high schools attended:				Number of years attended:
	.				
11	List the name of any college you have attended.	Year Began	Year Ended	Year Graduated (If applicable)	Type of Degree Received (If applicable)
	A.				
	B.				
	C.				
12	What specialty/major do you plan to major in as you continue your education?				
	.				
13	If currently attending college, please list expenses you expect to incur per semester or quarter: (Approximate figures acceptable)				
	.				

A.	Tuition:	Amount: \$	
B.	Books:	Amount: \$	
C.	Room & Board:	Amount: \$	
D.	Other expenses:	Amount: \$	Describe below under comments
E.	Other expenses:	Amount: \$	“

Comments:

14. If currently attending college, list other financial assistance you will receive per semester or quarter:

A.	Personal:	Amount: \$	
B.	Other Scholarship(s):	Amount: \$	Describe below under comments
C.	Grants:	Amount: \$	“
C.	Student Loan(s):	Amount: \$	“
D.	Other Financial Resources:	Amount: \$	“

Comments:

Use an additional sheet if you need more room to list financial information requested in items 13 & 14.

15. What are your educational and professional goals and objectives by participating in this scholarship program?

16. List your academic honors, awards and membership activities while in high school or college:

17.	List your community service activities, hobbies, outside interests, and extracurricular activities:
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18.	<p>Personal Essay Please answer the following question: <i>How have you worked in your life to make a positive difference?</i> Submit your response on the last sheet provided with this application.</p>
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19.	<p>A. The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee. B. Your application will be returned to you if these items are not attached to this application. (No exceptions.) C. Circle "YES" or "NO" to be sure you have attached each item as required.</p>		
	YES	NO	Three (3) reference letters. Return these completed letters in a sealed envelope from your teachers or professors.
	YES	NO	Proof of current student enrollment. A letter of current high school attendance or college attendance is required for receipt of funds.
	YES	NO	Most recent <u>official</u> high school or <u>official</u> college transcript. Photocopies of your transcript are <u>not acceptable</u> .
	YES	NO	Personal Essay. How have you made a positive difference in your community, school, family, etc.?

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Association's scholarship program.

I hereby understand that if chosen as a scholarship winner, according to Sioux Falls Sister City Association's policies, I must provide evidence of enrollment/registration at a high school or post-secondary institution before scholarship funds can be awarded.

Signature of scholarship applicant: _____ Date: _____

REMEMBER

The deadline for this application to be received by the Association is March 3 2017 **5:00 p.m.** **No exceptions!**

Personal Essay

How would you make a positive difference in the Sioux Falls community through an exchange program?