

## HIGH PLAINS POWER, INC., MEMBER SCHOLARSHIP APPLICATION FORM

## PLEASE TYPE OR PRINT

| Full name of applicant:   |             |  |
|---|-------------|--|
| Phone number:   |             |  |
| Mailing address:  |             |  |
| Physical address:   |             |  |
| Check the appropriate<br>Description:<br>(check one)  | a)          | applicant is a current member or a dependent of a current member of High Plains Power, Inc.  |
|   | b)          | applicant is receiving electric service to their primary domicile by way of a High Plains Power membership listed in another name. |
| If you checked b,<br>Provide the name and<br>address of membership<br>which you receive servi |             |  |
| Name (s) of parent:   |             |  |
| Parent's occupation:  |             |  |
| Name of high school<br>you will graduate from:  | :           |  |
| Cumulative Grade Poin   | nt Average: |  |
| Composite ACT/SAT S   | Saarat      |  |

| Name and address of the school you will be attending this fall:                         |
|---|
| Have you been accepted at the above school?YesNo  |
| Are you a U.S. Citizen?No   |
| Please list any honors or awards you have received.                                     |
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| Please list any school, community, county or other activities you have participated in. |
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| Please write a brief statement outlining your educational and career goals.  |
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| <u> </u>   |
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| Please write a brief statement describing your work experiences (summer jobs, work on family farm or ranch, summer schools or camps attended etc.) |
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| Please write a brief statement explaining why you are seeking this scholarship.  |
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|---|------------------------------------|
| How many people are in your immediate family?   |                                    |
|   |                                    |
| Attach two (2) letters of recommendation. These members. At lease one of the recommendations reacher, guidance counselor, or principal. | <u> </u>                           |
| Attach a copy of your high school transcripts incaverage to this application.   | luding your cumulative grade point |
| average to this application.  |                                    |
|   |                                    |
| Applicant's signature   | Date                               |
|   |                                    |
|   |                                    |
| Parent or Guardian's signature  | Date                               |
| Parent or Guardian's signature  | Date                               |

To be eligible, all requirement criteria and completed application forms must be received by the High Plains Power, Inc. Riverton office no later than **March 18, 2022**. If you have questions contact:

Angela Wallace High Plains Power, Inc. P.O. Box 713 1775 E Monroe Riverton, WY 82501 1-800-445-0613 307-856-9426

ALL SCHOLARSHIP ENTRIES ARE CONFIDENTIAL AND WILL ONLY BE VIEWED BY THE HIGH PLAINS POWER, TRI-STATE G&T AND BASIN ELECTRIC SELECTION COMMITTEES. APPLICATIONS WILL NOT BE CONSIDERED UNLESS THE ABOVE REQUIRED INFORMATION IS COMPLETE.

Provided by: High Plains Power, Inc. in cooperation with Tri-State Generation and Transmission Association and Basin Electric Power Cooperative.