

Hemlock



Sawdust Days

Hemlock Sawdust Days Celebration
P.O. Box 114
Hemlock, MI 48626
hemlocksawdustdays.com
info@hemlocksawdustdays.com

Scholarship Application

Due: March 15th

Qualifications:

- Applicant must be a Hemlock high school senior or senior in Hemlock's Alternative Education program in good standing.
- Applicant must be planning to attend a post-high school institution (4 year college, 2 year college, trade school or technical school, etc.) in the fall.
- Applicant must log 4 or more hours working with the Sawdust Days "lumber crew" within a 4 year period. Examples are as follows: set up, tear down, operate activity, and helping with Holiday Bazaar and the Spring Fling Bazaar. (expressed through essay)
- Consideration of applicants will be based on school/community service, financial need, extracurricular involvement (if applicable), and academics.
- Preference will be given to those applicants NOT on the Top Ten List; meeting all other requirements

Form submission:

- All forms can be sent to Hemlock Sawdust Days, Re: Scholarship Application, P.O.Box 114, Hemlock, MI 48626 or complete the form online at www.hemlocksawdustdays.com
- Complete and sign (with parent) the Applicant Information Form below.
- Attach a copy of your high school transcript
- Please provide us with an essay answering the questions listed below. The essay should be a minimum of one typed page (up to 14 font)
 - Describe any financial circumstances that should be taken into consideration regarding how this award would help you to further your education.
 - How have you been involved with the Sawdust Days Celebration/Bazaars? (give details)
 - Explain what it means for you to be involved in the Sawdust Days Celebration?
 - Tell us of other activities, community organizations, volunteerism, etc.)
 - How do you plan to continue your involvement in the future?
 - What career choice/choices are you looking at and why? What institution (s) are you considering?

Applicant Information:

- Name _____
- Address _____
- Email _____
- Phone Number _____ Cell ___ Yes ___ No
- Career Goal and/or college major _____
- Name of institution you plan to attend _____

Family Information:

- Fathers name _____ Place of employment _____
 - Mothers name _____ Place of employment _____
- _____

I understand that this Scholarship money is for attending college. If for some reason I cannot attend as planned, the money will be returned in full. I also affirm that the above stated information is true to the best of my knowledge.

Signature of Applicant _____ **Date** _____

Signature of Parent(s) _____ **Date** _____