



2018 Scholarship Application

Eligibility Qualifications:

YCMP mentor

High-school seniors

In pursuit of higher education/training

Scholarship Funds:

Three, \$750 scholarships will be awarded

Deadline:

April 6, 2018

It is the mission of Dillon Youth Connections Mentoring Program to enhance the lives of children through mentoring by supported one-to-one relationships.

Our vision is that every child in our service area has the opportunity to be part of a mentoring relationship that will cultivate strong personal bonds and community involvement. We work to provide mentors, mentees, and their support systems with connections to community resources and support each of them to develop successful peer and family relationships.

Please mail completed applications to:

Dillon YCMP

PO Box 87

Dillon, MT 59725

For any questions regarding our scholarship program, please contact:

Bob Pfister [YCMP Chair] at 406-241-9580

PERSONAL INFORMATION

Name _____ Phone _____

Mailing Address _____

Email _____

MATCH INFORMATION

Lunch Buddy Mentee Name: _____ Grade _____

Years you've been matched with the above mentee _____ Years you've been active in YCMP _____

Have you been matched to a previous mentee? Yes No

If yes, please provide:

Reason for new match _____

Previous mentee name _____ Length matched _____

PARENT/GUARDIAN INFORMATION

Name of Parent/Guardian _____ Phone _____

Address _____

Email _____

POST-SECONDARY SCHOOL DATA

Please list in order of preference the schools/training you wish to attend. Please use official organization names.

<u>Name</u>	<u>Location</u>	<u>Degree/Certificate Sought</u>
Example: University of Montana	Missoula, MT	4- year degree

Major course of Study _____ Anticipated Start Date _____

OTHER INVOLVEMENT

Please complete each category. If it does not apply, mark the cell with "N/A." Feel free to attach an additional sheet if more room is required.

<u>Activity</u>	<u>Years Active</u>	<u>Special Awards/Honors</u>	<u>Offices Held</u>

LETTERS OF RECCOMENDATION

Please attach 2 letters of recommendation with the submission of your scholarship application. Please exclude family members.

SUBMISSION LETTER

Please attach an essay, maximum of 2-pages double-spaced, explaining why you would like to be considered for the YCMP scholarship. Focus should surround the YCMP mission & values.

VALIDATION STATEMENT

I hereby affirm that all of the information I have provided above is true, correct to the best of my k knowledge, and completed by me. I understand that if chosen as a scholarship winner, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded. I also affirm no supporting documents have been falsified in any way.

Signature of Scholarship Applicant

Date

Signature of Parent/Guardian

Date

Number of attached pages _____