

Great Harvest Franchising,
Inc.
28 S. Montana St.
Dillon, MT 59725
Phone: (406) 683-1655
Fax: (406) 683-5537
www.greatharvest.com

GREAT HARVEST SCHOLARSHIP APPLICATION
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Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Great Harvest Franchising, Inc. is offering a four-year scholarship of \$1,500 per year to a Beaverhead County High School senior planning to attend college during the 2023-2024 academic year. Immediate family members of Great Harvest Franchising, Inc. employees are not eligible. This scholarship is based on both financial need and academic achievement.

Qualifications:

- You must have at least a 3.25 cumulative GPA.
- You must be an enrolled student at BCHS.

Please complete and submit application in a sealed envelope to:

Brennan Juden
Great Harvest Franchising, Inc.
28 South Montana Street
Dillon, MT 59725

Deadline: 12:00 p.m. FRIDAY, MARCH 3RD, 2023
LATE APPLICATIONS WILL NOT BE ACCEPTED.

APPLICATION

Please provide the following information:

- Your current cumulative GPA _____.
- Two letters of recommendation, one must be from a high school teacher.
- A copy of your high school transcript.
- Responses to the two essay questions and financial need questions on the following pages.
- Responses to the following three questions:
 1. List all extracurricular activities and volunteer service projects in which you have participated. Include the year(s) of participation and any special awards or honors you earned.

2. List jobs and/or internships you have had during the last four years. Include the range of dates worked and the approximate number of hours worked per week.

3. Where will you be attending college in the fall of 2023 and what is your planned area of study?

ESSAYS

Please answer the following:

1. Explain why you are the best applicant to receive this scholarship (minimum of 500 words).

2. Describe an accomplishment of yours that took place in the last five years of which you are most proud. Responses are not limited to the academic or extracurricular arena (minimum of 200 words).

FINANCIAL NEED

Financial need will be taken into consideration in the selection of this year's recipient. In order to assist in this selection, please provide the following:

1. Record the number of people in your parents' household listing each member of the household and their age (include yourself).

2. How will you be financing your college education? Please list any scholarships awarded and sources of other funds available for your education – grandparents, education savings accounts, etc.

3. Record your parents' 2022 adjusted gross income from their 2022 federal income tax return (line 11 on form 1040) (If you have not completed your 2022 taxes, please provide 2021 with an explanation of any known differences for 2022):

\$ _____

4. Record the number of people in your parents' household that are currently attending college, listing each attendee and their age.

5. Fill out the following worksheet with your household information to help determine financial need.

	Assets
Cash, Checking, Savings	_____
Securities	_____
Retirement (401K, IRA, etc)	_____
Real Estate Market Value	_____
Personal Property	_____
Other Assets	_____
TOTAL ASSETS	_____
	Liabilities
Accounts + bills due	_____
Notes Payable to banks/others	_____
Real Estate Mortgages	_____
Other Debts	_____
TOTAL LIABILITIES	_____
NET WORTH (Total Assets – Total Liabilities)	_____

***Note: Financial information provided will be kept strictly confidential and is used solely to help determine varying degrees of financial need.**