

**DR. DAVID LEGAARD SCHOLARSHIP
CRITERIA OF SELECTION**

WHO MAY APPLY:

Any graduating Senior who has attended Smithville High School for the last four semesters and is planning to further his/her education in a two-year or four-year college in the fall in the same year he/she is graduated from high school.

METHOD OF APPLICATIONS:

Application blanks may be obtained from the high school counselor during the second semester of the senior year. Deadline for applying will be Monday, April 3, 2023.

AMOUNT OF SCHOLARSHIP:

The amount of the scholarship depends on the amount of interest accrued during the current year on the money in the Dr. David Legaard Scholarship Fund established in 2002. The 2023 scholarship will be awarded as either one \$500 or two \$250 scholarship(s), depending on the number and quality of applicants.

CRITERIA OF SELECTION:

The student must have a minimum of a 2.5 GPA at the end of the first semester of his/her senior year in high school.

The student must show evidence of participation in extra-curricular activities which could be at school, church, community, or a work experience.

The student must submit a one-page letter to be attached to the application stating why he/she should be considered as the recipient of the scholarship.

The student's application must be accompanied by two letters of recommendation from the faculty or from the community indicating why the applicant should be considered for the scholarship.

The student must attach a copy of his/her high school transcript.

SELECTION COMMITTEE:

The selection committee shall be made up of faculty members and administrators from Smithville High School. They will screen applications and select one recipient and one alternate in the event the recipient does not use the scholarship in the fall.

PRESENTATION OF SCHOLARSHIP:

The scholarship will be awarded on awards night of Smithville High School and will be presented by a high school counselor.

DR. DAVID LEGAARD SCHOLARSHIP APPLICATION

(Type or print all information)

Name of student: _____

Student's mailing: _____

City: _____ **Zip Code:** _____

Social Security Number: _____ **Phone:** _____

Grade point average (first semester of senior year): _____

Name of College Attending: _____

Major: _____ **Career Choice:** _____

Both Parent(s) or Guardian(s) names: _____

Both Parent(s) or Guardian(s) Occupation(s): _____

Number of Children in Family: _____ **Number of Persons Living at Home:** _____

Number of Children Currently Enrolled in Post Graduate Education and Name of Institution(s): _____

SCHOOL/ COMMUNITY/CHURCH/WORK INVOLVEMENT:

List major activities you have participated in during your high school years. Please list the name of activity, number of years of participation, offices held, etc.: (You may make an attachment if not enough room).

FINANCIAL DATA:

What Scholarships and Financial Aid have you been awarded? (You may make an attachment if not enough room).