ND RETAIL LUMBERMAN'S SCHOLARSHIP APPLICATION Committee Use Application should be handwritten and completed by applicant. Only Applicant must be a dependent of an employee of a paid NDRLA member. **Points** Allowed PERSONAL INFORMATION 0 1. Name: ______ Date: _____ Address: _____ Home Phone#: ____ 0 3. City and State: _____ 0 4. Father's Name: _____ Employer: _____ 0 5. Mothers Name: Employer: 6. Number of Brothers and Sisters: 0 7. Name of NDRLA Business You Are Associated with: 0 **EDUCATIONAL INFORMATION** 8. What High School Did / Will You Graduate From: ______ Year _____ 0 - 59. High School Class Size and 7th Semester Rank: GPA: 0 - 510. College You Plan To / Are Attending: _____ 0-5 11. Field of Study: ______Credits Earned to Date if Attending College: _____ 0 - 5FINANCIAL INFORMATION 12. Applicant's Present Resources and Value: ______Currently Employed? _____ 0-5 13. What other Scholarships / Grants have you received and their Dollar Value:_____ 0-5 14. Percentage of Your Educational Expenses Your Parents Are Financially Capable of Paying: ______ 0-5 **EXTRACURRICULAR ACTIVITIES** 15. School Activities 15. Community & Church Activities School Activities A. _____ A. _____ 0-5 B. _____ B. _____ Community **Activities** 0-5 D. _____ D. _____ APPLICANT: Please submit the following with this application: 1. A one-page handwritten letter stating your future plans and goals as they relate to this 0 - 10scholarship. 2. A character reference letter from one of the following: Teacher, Guidance Counselor, 0-5 Clergy Member or Employer.

Complete and return this application by January 1, 2023 to:

BRIAN TUITE

104 GRANT ST

FINLEY, N.D. 58230