



# LITTLE WOUND SCHOLARSHIP

## ABOUT THIS SCHOLARSHIP

Security First Bank believes in investing in our community and in the future of our community. That's why we provide scholarships to deserving local students because we know they will make a difference in all of our futures. We are excited to offer two (2) \$500 scholarships to graduating high school seniors to continue their post-secondary education.

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## ELIGIBILITY

To be eligible for this scholarship, the student must meet the following criteria:

- ▶ Student must have a 2.0 or higher Grade Point Average.
- ▶ Student must be a senior at Little Wound High School.

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## APPLICATION PROCESS

Complete the application and provide the following information on separate pages. Please include your name and high school at the top of each page.

- ▶ Please provide answers to the following three (3) questions. Limit your answers to one page total:
  1. In what subjects do you excel and to what factors do you attribute to your success in this area?
  2. What are your short and long term goals? List your objectives to accomplish these goals.
  3. Describe/identify something in your community that has influenced you in a positive way. What effect did this have on the short or long term goals that you have established?
- ▶ A copy of your high school transcript.
- ▶ Provide a resume of your high school career and employment experience. Please include awards, recognitions, activities, leadership positions and work history.

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## SCHOLARSHIP DEADLINE

**April 15<sup>th</sup>** - Applications are due.

Please submit your application to your school Activity Director.

**End of April** - Winners will be notified.





Security  
First  
Bank Member  
FDIC



Security  
First  
Insurance

# LITTLE WOUND SCHOLARSHIP APPLICATION

Please print or type:

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

High School Name \_\_\_\_\_

Graduation Date \_\_\_\_\_ Grade Point Average \_\_\_\_\_

College, University or Technical Institute you plan to attend \_\_\_\_\_

Intended Field of Study \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS

Please give your completed application to your school  
Activity Director by **April 15<sup>th</sup>**.

Please include the following:

- ▶ Completed application
- ▶ Answers to questions asked
- ▶ High school transcript
- ▶ Resumé