



MINNESOTA COMMUNITY FOUNDATION

The William S. and Margaret W. Marvin Warroad Scholarship Fund of Minnesota Community Foundation

Established by the Marvin family, the William S. and Margaret W. Marvin Warroad Scholarship recognizes graduating seniors from Warroad High School who demonstrate academic achievement (40%), school-based extracurricular activities (25%) and community-based activities and work (35%).

Awards are renewable for up to a maximum of four years, if renewal conditions are met (2.25 minimum cumulative GPA). The scholarship value is the amount of tuition and fees at the enrolling school* up to a maximum award of \$12,326 for a four-year award and \$5,616 for a two year award. Students who receive a two-year award will be eligible to apply for an additional two years of funding at the four-year rate if they transfer to an eligible four-year degree granting program after completing their two-year degree.

Eligibility Criteria

Applicants must be graduating from Warroad High School and plan to attend an accredited two- or four-year degree-granting program on a full-time basis. In addition, applicants must have a minimum 2.0 cumulative GPA on a 4.0 scale. Award amounts will be prorated based on number of years of attendance at Warroad Middle and High Schools, with a minimum of two full years of enrollment. Award amounts will be prorated for PSEO students.

Application Procedures

The application form and all supplementary documents must be postmarked by March 19, 2010, and mailed to:

Yer Chang
Minnesota Community Foundation
55 Fifth Street East, Suite 600
Saint Paul, MN 55101-1797

Incomplete applications will not be considered.

Minnesota Community Foundation administers the William S. and Margaret W. Marvin Warroad scholarship program and makes awards based on recommendations from an independent selection committee using a blind selection process. Please contact Yer Chang at 800.875.6167 or yc7@mncommunityfoundation.org with questions concerning the scholarship.

*As determined by Minnesota Office of Higher Education

The William S. and Margaret W. Marvin Warroad Scholarship Application

Student Information

Name (Last, First, Middle Initial) _____

Permanent Address _____

City, State, Zip _____

Home Phone _____

Alternate/Cell Phone _____

E-mail _____

Please check your years of full-time enrollment at Warroad Middle or High School.

7th grade 8th grade 9th grade 10th grade 11th grade 12th grade

Cumulative GPA: _____

(please submit one official transcript and one copy with all identifying information whited out)

Are you currently or have you taken PSEO courses in the past? Yes No

If yes, please indicate where and the number of semesters (attach additional pages if needed).

College/University Information

School you are planning to attend: _____

School Address _____

City, State, Zip _____

Intended Major: _____

Degree you will be pursuing*: Associate's Degree Bachelor's Degree

Other: (please specify)

**If you apply for and receive the two-year award, the award amount will be the same for both years. Two-year award recipients will have an opportunity to apply for two additional consecutive years of funding if they transfer to an eligible four-year degree-granting program after completing their two-year degree.*

Personal Statement

The personal statement is a very important part of the selection process, so give it careful consideration and attention. In an attached document, please describe your educational and career goals. Include any special circumstances of which the scholarship selection committee should be aware, but do not include any identifying information. Do not exceed one page. You must sign and date the back of your personal statement to be eligible for the award. Your signature indicates your certification that the personal statement is your original work. If it is found that the personal statement is not your own, any award that has been granted will be canceled.

Application Checklist

- completed and signed application form
- personal statement (No identifying information in the statement. Sign the back.)
- letter of recommendation from a teacher or academic advisor
- list of school-based extracurricular activities
- list of community-based activities and work verified by Gary Olson
- one official transcript and one additional copy with identifying information whited out

I certify that the information I have provided is complete and accurate to the best of my knowledge. If requested, I will submit proof of information contained in this application. Falsification of information will result in termination of any award granted. Minnesota Community Foundation and The Saint Paul Foundation reserve the right to review the conditions and procedures of this scholarship program and to make changes at any time, including termination of the program. All scholarship decisions are final. Your signature authorizes representatives of Minnesota Community Foundation to examine your academic and personal records. It also certifies the accuracy of the information you have provided and that all materials submitted (except transcripts and recommendations) are the original work of the applicant. If selected to receive a scholarship, your signature on this application also gives The Foundation permission to use your name, likeness and education-related information contained in this application for promotional purposes by Minnesota Community Foundation and The Saint Paul Foundation without further compensation or notification.
Unsigned applications will not be considered.

Applicant Signature

Date



MINNESOTA COMMUNITY FOUNDATION

The William S. and Margaret W. Marvin Warroad Scholarship Fund of Minnesota Community Foundation

Scholarship Recommendation Form

To the applicant:

Please fill in your name and address before giving this form to the person you have asked for a recommendation.

Name (Last, First, Middle Initial): _____

Address: _____

City, State, Zip: _____

To the recommender:

The student named on this form is applying for a scholarship and has asked you to provide Minnesota Community Foundation with any information you feel would be helpful in reviewing his/her application. You may be assured that the information will be considered confidential. If you are unable to complete this form by the deadline, please notify the applicant so that he/she may secure another reference.

Name and title of reference: _____

Phone: _____

When providing a recommendation, please do the following:

1. Write or type your letter of recommendation on a separate sheet of paper. Please sign it and include it with this form. **Please do not refer to the applicant by name in the letter.** Do not use staples.
2. Return completed recommendation letter to student or mail directly to:

Yer Chang
Minnesota Community Foundation
55 Fifth Street East, Suite 600
Saint Paul, MN 55101-1797

The application form and all attachments must be postmarked by **March 19, 2010**. Please contact Yer Chang at 800.875.6167 or yc7@mncommunityfoundation.org with questions concerning the scholarship.