



# Cemstone Companies Scholarship Fund of The St. Croix Valley Foundation

## Scholarship Application

Postmark Deadline: **July 1, 2018**

Please type or write legibly. Submit this application, letter of recommendation, and required transcripts to:

### Scholarship Services

The St. Croix Valley Foundation  
516 Second Street, Suite 214  
Hudson, WI 54016

telephone: 715.386.9490  
fax: 715-386-1250  
email: [apilgrim@scvfoundation.org](mailto:apilgrim@scvfoundation.org)

### I. Application Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

I am a full-time Cemstone employee. Yes \_\_\_\_\_ No \_\_\_\_\_

I am a dependent of a full-time Cemstone employee. Yes \_\_\_\_\_ No \_\_\_\_\_

### II. Employee/Parent Information:

Note: Applicant must be a full-time active employee or a dependent child of a full-time employee at the time of application. The employee must have one year of full-time employment at the time of application.

Employee Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Job Title: \_\_\_\_\_ Department: \_\_\_\_\_

Facility Location: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

### III. Post-Secondary School Attending in the Fall of the Year in which the Scholarship is Awarded.

A copy of transcripts for all post-secondary education (college, university or vocational-technical, and for applicants who graduated within the past five years – high school transcripts), MUST accompany this application.

Post-secondary school:

Address:

City, State, Zip:

4-yr College/University \_\_\_\_\_ 2-yr Community/Junior College \_\_\_\_\_ Vocational/Technical School \_\_\_\_\_

Planned major or course of study: \_\_\_\_\_

Anticipated graduation date: \_\_\_\_\_ Year in school in the fall: \_\_\_\_\_

Are you currently enrolled as a full-time post-secondary student? Yes \_\_\_\_\_ No \_\_\_\_\_ Part-time Yes \_\_\_\_\_ No \_\_\_\_\_

Will you be enrolled as a full-time post-secondary student in the fall? Yes \_\_\_\_\_ No \_\_\_\_\_ Part-time Yes \_\_\_\_\_ No \_\_\_\_\_

(Employees may use the scholarship for full-time or part-time study. Dependents must use the award for full-time study.)

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## IV. Activities, Awards:

List or attach a list of all high school and community/volunteer activities in which you have participated. Indicate any special awards or honors, and number of years involved in the activity.

| Activity | Awards/Honors | Mo/Yr-Mo/Yr |
|----------|---------------|-------------|
| <hr/>    |               |             |
| <hr/>    |               |             |

## V. Leadership:

List or attach a list of all high school or community activities in which you have had a leadership role.

| Activity | Office/Leader Role | Mo/Yr-Mo/Yr |
|----------|--------------------|-------------|
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## VI. Work Experience:

| Employer Position | Description | Mo/Yr-Mo/Yr |
|-------------------|-------------|-------------|
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## VII. Goals:

In 500 words or less, describe your goals and aspirations as they relate to your education and career objectives. Attach additional pages if necessary.

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## VIII. Transcripts:

Transcripts from all post-secondary education, and high school transcripts for students who have graduated within the past five years, MUST be attached to the application.

## IX. Letter of Recommendation:

Enclose a letter of recommendation from a teacher, counselor, or supervisor reflecting your strengths as a student or employee.

**NOTE: INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

I certify that the above information is complete and accurate, to the best of my knowledge. If selected to receive a scholarship, the Applicant agrees to the use of his/her name, likeness and education-related information contained in his/her application for promotional purposes by Cemstone and The St. Croix Valley Foundation without further compensation or notification.

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

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_