DIRECTORS:
Kevin Beyer, Bill Eckles, Mary Ehmke, Shelly Geerdes, Steve Katka,
Tom Kohlbry, Jean Pauk, Cheryl Scapanski, Dave Wolf

**MINNESOTA TELECOM ALLIANCE FOUNDATION**
**2019 SCHOLARSHIP APPLICATION**
**Award amount: $2,000.00**
**REQUIRED ITEMS NEEDED FOR THE SCHOLARSHIP APPLICATION**

*YOUR APPLICATION WILL NOT BE CONSIDERED IF IT IS INCOMPLETE.*

The following documents must accompany this application:

1)  A copy or certificate, verified by an appropriate school official, stating the applicant's ACT/SAT test scores, Grade Point Average (GPA) and high school transcript, including courses taken and grades received, from the first year of high school to date of application.

2)  A written essay by the applicant containing no more than 500 words, answering these questions:

 * What is your primary goal in life?

 * Why did you choose that goal?

 * How do you expect to achieve that goal?

3)  Two appraisal forms, one from a school counselor, advisor or administrator and the other from a teacher of the applicant's choosing.  The appraisal addresses character, personality, skills and other relevant information concerning the applicant.

4)  ALL APPLICANTS MUST BE MINNESOTA RESIDENTS AND RECEIVE AT LEAST ONE SERVICE FROM A TELEPHONE COMPANY THAT IS A MEMBER OF THE MINNESOTA TELECOM ALLIANCE.

**Once completed, this application must be printed and submitted to your local telephone company manager by February 22, 2019.**

If you are a TDS customer, please send your application to:
Jean Pauk
TDS
525 Junction Road
Madison, WI 53717

**Once you have completed and printed the form, include it with the rest of the information requested for the application process.**

If you are selected to receive this scholarship, it will be paid to you at the end of the 2019-2020 school year after showing the Minnesota Telecom Alliance Foundation that you have successfully completed your academic work.

**MINNESOTA TELECOM ALLIANCE FOUNDATION**
1000 Westgate Drive, Suite 252, St. Paul, MN 55114-8679
Telephone: (651) 291-7311    Fax: (651) 290-2266
www.mnta.org

# 2019 SCHOLARSHIP APPLICATION
## (All forms are to be neatly printed or typed.)

## Personal Information

Full Name _____    Date of Birth _____

Street Address _____

City _____    State _____    Zip _____

Email Address _____    Telephone Number _____

## Parent/Guardian Information

Name _____

Permanent Mailing Address (if different from applicant)

_____

Email Address _____    Telephone Number _____

## Education

List in chronological order all schools attended in the last three years, including any summer or special courses.

| Name of School | Location (City) | Date of Attendance |
|---|---|---|
| | | |
| | | |
| | | |

Name of College/Technical College to Attend (1st Choice) _____

Name of College/Technical College to Attend (2nd Choice) _____

Desired Course of Study or Major (You may indicate more than one, or answer "undecided")

_____

Have you been accepted at any school?       Yes       No

If so, which one(s)? _____

Have you been awarded (or reasonably expect to receive) other grants or scholarships?       Yes       No

If so, please complete section below:

| Name of Award / Grant or Scholarship? | Amount | Granted | Pending |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

## Activities and Work Experience

List any academic distinction or honors you have won in high school (grades 9-12) and grade level in which it was achieved.

Academic Distinction or Honor                                                                Grade

_____    _____

_____    _____

_____    _____

_____    _____

_____    _____


List school and community activities in which you have been actively engaged in the last four years and which you feel have been most meaningful to you. (Activity, number of years, grade level participated, class offices held).


List jobs (including summer employment) you have held in the past four years. (Job or type of work, employer, year, number of hours worked weekly and how long you worked there. You may use additional sheets if necessary.)

## Essay

On a separate sheet of paper, type a statement of NO MORE THAN 500 WORDS answering these questions:

1. What is your primary goal in life?

2. Why did you choose that goal?

3. How do you expect to achieve that goal?

## Explanation/Special Circumstances

Please use this space to explain any special circumstances. (Ex: illness, disabilities, major tragedies or family issues).

## Application Checklist and Signature

This application for student aid becomes complete and valid only when you have returned the following materials.

Application

Current Transcript of Grades

Applicant Appraisal (2)

Essay

All Required Signatures

Application Deadline

Applicant's Signature _____   Date _____

I am applying for:

One $2,000 Telecom Scholarship: To be eligible, applicants must be majoring in either Telecommunications or Information Technology (IT) at a university, college, or technical college and be a Minnesota resident.

One of five $2,000 General Scholarships: To be eligible, applicants must be attending post-secondary education at a university, college, or technical college, be a Minnesota resident, and the applicant's family must subscribe to at least one service from a MTA member company.

## CHECK LIST FOR MTA FOUNDATION SCHOLARSHIP APPLICATION

Are all of the following complete?

- Student's personal information

- Student's choice of school

- Student's desired course of study

- Essay of no more than 500 words

- Number of students in class and the student's rank in class

- Grade point average (GPA)

- Total number of students enrolled in high school (grades 9-12)

- Copy of ACT or SAT test scores

- Student's transcripts, properly verified

- **Two** appraisals completed by administrator/advisor/counselor/teacher

- Teacher, school counselor or administrator signatures

- Applicant's signature

- Local telephone company manager's verification

## Required Applicant Appraisal

**Name of Student** _____

TO BE COMPLETED BY HIGH SCHOOL COUNSELOR, ADVISOR, INSTRUCTOR, OR SUPERVISOR.

You have been asked to provide information in support of this application for financial aid.  Please give immediate and serious attention to the following statements.  When complete, please return to applicant or photocopy this section and return to applicant in a sealed envelope.

| | extremely appropriate | very appropriate | moderately appropriate | inappropriate |
|---|---|---|---|---|
| The applicant's choice of a post secondary education program is | | | | |

| | extremely well | very well | moderately well | not well |
|---|---|---|---|---|
| The applicant's achievements reflect his or her ability | | | | |
| The applicant is able to seek, find, and use learning resources | | | | |
| The applicant demonstrates curiosity and initiative | | | | |
| The applicant demonstrates good problem-solving skills, follows through, and completes tasks | | | | |

| | excellent | good | fair | poor |
|---|---|---|---|---|
| The applicant's ability to set realistic and attainable goals is | | | | |
| The applicant's commitment to school and community is | | | | |
| The applicant's respect for self and others is | | | | |

Comments

Appraiser's Name _____  Title _____

Email Address _____  Telephone Number _____

Appraiser's School Address _____

City _____  State _____  Zip _____

Signature _____  Date _____

## Academic Information and Transcript

High school seniors and students who have completed less than one full semester of post-secondary education must include a high school transcript of grades and have the following section completed by the appropriate school official.

Applicant ranks \_\_\_\_\_ in a class of _____.

Total number of students in grades 9-12: \_\_\_\_\_

Cumulative grade point average \_\_\_\_\_ / 4.0 scale

<table>
<tr><td align="center">**SAT**</td><td align="center">**ACT**</td></tr>
<tr><td>Verbal: _____</td><td>Standard English: _____</td></tr>
<tr><td>Math: _____</td><td>Math: _____</td></tr>
<tr><td></td><td>Reading: _____</td></tr>
<tr><td></td><td>Science: _____</td></tr>
<tr><td></td><td>Composite: _____</td></tr>
</table>

## For college-bound seniors, national percentile only.

School Official's Name _____   Title _____

Email Address _____   Telephone Number _____

School Address _____

City _____   State _____   Zip _____

Signature _____   Date _____

# MTA FOUNDATION SCHOLARSHIP APPLICATION VERIFICATION

**\*TO BE COMPLETED BY LOCAL TELCO MANAGER
AND SUBMITTED TO THE FOUNDATION BY March 15, 2019\***

Each application submitted to the MTA Foundation must include this endorsement.

**(DO NOT GIVE THIS FORM TO THE HIGH SCHOOL.)**

Applicant's Name _____

Review application and answer the following questions:

I have reviewed this application and find it to be complete.        Yes        No (If no, please comment)

The applicant lives in a household that subscribes to at least one service from my company.        Yes        No (If no, please

comment)

Additional comments about this applicant:

I hereby verify that the above application has been reviewed by me for completeness and is being submitted to the Minnesota Telecom Alliance Foundation for consideration to be awarded a scholarship for the 2019-2020 school year.

Name _____        Telephone Company _____

Email Address _____        Telephone Number _____

Mailing Address _____

City _____        State _____        Zip _____

Signature _____        Date _____

All information on this form will be kept in strict confidence.

The recipient of the MTA scholarship will receive an award of $2,000. The scholarship will be paid at the end of the 2019-2020 school year upon showing successful completion of academic work.