

2014 APPLICATION DIRECTIONS

The following information must be included in your application packet:

- 1. High school transcript (minimum 2.0 grade point average)
- 2. Three letters of recommendation, one from each of the following:
 - Classroom teacher
 - Community or industry member, or employer
 - Personal reference
- 3. Personal data narrative, **not to exceed two double-spaced pages**, including:
 - Personal history
 - Description of involvement in clubs, school, and community activities
 - Outline of education and career goals
- 4. Certification must be signed by applicant and high school counselor or principal.

Applications and supporting documents may be mailed or hand delivered to CVTC offices or turned in to your school's student advisor. All applications must be received in CVTC's business office no later than 5:00 p.m. on Friday, April 4, 2014.

Copper Valley Telephone Cooperative, Inc. is pleased to announce that \$11,000 in scholarships (\$5,500 per district) will be made available to graduating seniors whose parents are current members of CVTC, and who reside in the Valdez or Copper Basin School Districts, including the communities of Tatitlek and Mentasta.

The scholarship committee will select the finalists based on the merits of this application and possibly an interview.

Scholarship recipients will be recognized at the CVTC Annual meetings and again at graduation ceremonies.

Proof of school acceptance must be submitted prior to award disbursement. Disbursement of the award will be made to the school's financial aid office following receipt of verification of enrollment from the school.

In the event no qualified applications are received, the Scholarship Committee reserves the right to forego awarding one or more scholarships in a given year.

COPPER VALLEY TELEPHONE COOPERATIVE, INC.

SCHOLARSHIP APPLICATION

NAME:		
ADDRESS:	I	PHONE NUMBER:
NAME OF PARENT OR GUARDIAN:		
HIGH SCHOOL PRESENTLY ENROLLED IN:		
NAME OF TRADE SCHOOL / COLLEGE:		
LOCATION:		
FIELD OF STUDY:		
I hereby authorize my school to complete the information required below:		
CUMULATIVE THROUGH JUNIOR YEAR:		
Grade Point: Cla	ass Size:	Rank:
SENIOR YEAR:		
Grade Point: C	lass Size:	Rank:
Student's Signature		Date
Counselor / Principal's Signature		Date

Please attach high school transcript, letters of recommendation and personal narrative to this form.