

# Roberts County National Bank/South Dakota Bankers Foundation 2010 Scholarship Application

This application is to be completed by Sisseton High School graduating seniors only, who will be attending an accredited South Dakota college, university, vocational technical school or community college on a full time basis. Applications must be returned to the address listed below by April 30, 2010 for consideration.

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Name (Last, First, MI)

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Birth Date

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Address

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Social Security Number

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City, State, Zip

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Telephone

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Name of Parent(s)/Guardian(s)

---

Expected Graduation Date (Month/Year)

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Parent/Guardian Address and Phone (If different from above)

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College or Post Secondary School You Are Planning to Attend (Include City):

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Intended Major or Area of Study:

**For all of the following, if more space is needed you may attach additional sheets.**

**Please list any high school activities/organizations you have held office or participated in, and honors or awards you have received in conjunction with those activities. Be specific by year as to when you participated and when awards were received.**

**Activity/Organization**

**Offices Held/Honors/Awards**

**School Year 9-12**

**Please list any community service, leadership, church, or other activities outside of high school in which you have been involved or held office, and any honors or awards you received in conjunction with those activities**

**Activity/Organization**

**Offices Held/Honors/Awards**

**School Year 9-12**

**Please include a personal statement that explains your scholarship qualifications, career objective/academic interest, planned post secondary extra-curricular activities, and any other information you feel is pertinent to your eligibility for a scholarship.**

**Please provide at least two letters of recommendation with this application. Please include one reference from an individual who is not a high school official. (Example: Employer, Scout Leader, Summer Camp Advisor, etc.)**

*I hereby authorize my school guidance counselor to release the education information requested below for the purpose of completing this scholarship application.*

\_\_\_\_\_  
Student's Signature \_\_\_\_\_  
Date

**Have your high school guidance counselor complete the following information.**

Student's rank is \_\_\_\_\_ in a class of \_\_\_\_\_. Student's cumulative GPA is \_\_\_\_\_.

Date ACT or PSAT was/will be taken is \_\_\_\_\_. If taken, composite score is \_\_\_\_\_.

\_\_\_\_\_  
Guidance Counselor's Signature \_\_\_\_\_  
Date

**This application must be returned by April 30, 2010 to the following address. Applications received after that date will not be considered.**

**Roberts County National Bank  
5 East Maple Street  
PO Box 129  
Sisseton, SD 57262-0129**