

**EMPIRE ELECTRIC ASSOCIATION, INC.**  
**\$500 SCHOLARSHIP**  
**Vocational / Technical School**  
**Fall Scholarships**

The Board of Directors of Empire Electric Association, Inc. has a scholarship program for the purpose of aiding members or dependents of members in the area served by the Association to obtain a post high school education. The applicant or the applicant's parents or legal guardian must be a member of Empire Electric. The Fall Scholarships are leftover monies from the scholarships that are awarded in March of each year.

This scholarship shall be used for bonafide educational expenses as determined by the institution attended and must be used within the next school year following the grant of the scholarship or it will be forfeited by the recipient unless a delay is approved by the Board of Directors.

Empire will work with the local colleges to ascertain the need of those applying for the scholarships. You will be notified by the third week in September if you have received a scholarship. We ask that you supply us with:

- A. Completed application attached
- B. Two letters of reference from a teacher, counselor, or employer
- C. Written essay by you outlining your career goals, family situation and need and why you are applying for this scholarship.

**The scholarship committee will not consider your application if information is missing or incomplete.**

To be considered by the Board of Directors, this completed application must be returned to Empire Electric no later than **September 15th** of the current year.

**APPLICATION FOR THE EMPIRE ELECTRIC STUDENT SCHOLARSHIP  
Fall Vocational/Technical Scholarships**

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Applicant's Name: \_\_\_\_\_

Address: Physical: \_\_\_\_\_

Mailing: \_\_\_\_\_

Email Address: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

(Requested for identification purposes at college)

Name of Parent or Guardian: \_\_\_\_\_

EEA account number (from latest bill) \_\_\_\_\_

Home telephone number: \_\_\_\_\_ Cell: \_\_\_\_\_

Field of study you plan to pursue: \_\_\_\_\_

Hours or credits to be taken \_\_\_\_\_

Name and address of the institution you will be attending: \_\_\_\_\_

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Enclose the following information with this scholarship application:

- A. Two letters of reference from a teacher, counselor, or employer
- B. Written essay by you outlining your career goals, family situation and financial need and why you are applying for this Scholarship.

**Note: The scholarship committee will not consider your application if information is missing or incomplete.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_