



Norman L Bergey Scholarship Program

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly.

Application postmark deadline February 15, 2021

FOR SCHOLARSHIP AMERICA USE ONLY

I.D. #

APPLICANT DATA

Last Name _____ First _____ Middle Initial _____

Permanent Home

Mailing Address _____ Apartment # _____

City _____ State _____ ZIP Code _____

Phone (_____) _____ Date of Birth: Month _____ Day _____ Year _____

Email Address (Required for notification) _____

Please indicate your status. (For statistical purposes only) Male Female

American Indian/Alaska Native Black/African American Multi-Racial White

Asian Hispanic/Latino Native Hawaiian/Pacific Islander

EMPLOYEE PARENT OR GUARDIAN INFORMATION

Last Name _____ First _____ Middle Initial _____

Employee ID Number _____ Date of Hire: Month _____ Day _____ Year _____

Email Address _____

Work Phone (_____) _____

Job Title _____ Department _____

Division/Subsidiary _____ City _____ State _____

Relationship to Applicant _____ The applicant is a dependent of the employee Yes No

HIGH SCHOOL DATA

School Name _____ High School Graduation Date: Month _____ Year _____

City _____ State _____ Phone (_____) _____

POST-SECONDARY SCHOOL DATA

Name of postsecondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.)
Use official school names. Do **not** use abbreviations.

_____ City _____ State _____

_____ City _____ State _____

4 yr. College or University 2 yr. Community or Junior College

Vocational-Technical School Other, explain _____

Year in school next year: 1 2 3 4 5

Major or course of study _____ Expected college graduation date: Month _____ Year _____

Degree sought: Bachelor Associate Certificate Other, explain _____

If space provided is inadequate, you may continue on additional sheets. Your name, address and name of this scholarship program should be included on all attachments.

ESSAY What activities (academic, athletic, volunteer, cultural, community-related, occupational, etc.) do you participate in that most build and reflect your character? And how will you use these activities to influence your future?

APPLICATION CHECKLIST The student is responsible for submitting their application to Scholarship America on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when the complete application has been received.

Applications must be addressed to:

Norman L Bergey Scholarship Program
Scholarship America
One Scholarship Way
Saint Peter, MN 56082

Postmark deadline February 15, 2021

CERTIFICATION Scholarship America has the sole responsibility for selecting recipients. This application becomes the property of Scholarship America. (It is recommended you keep a copy for your files.) Applicable payroll tax withholdings will apply.

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any award granted.

Applicant's Signature _____ Date _____

Employee's Signature _____ Date _____