



**Gates of the Mountains Foundation College Scholarship Application
2234 Gold Rush, Helena, Montana 59601**

The Gates of the Mountains Foundation is a non-profit corporation established in 1973 to preserve the heritage of the 1805 Lewis and Clark expedition. Through a balance of preservation, education and recreation, the Foundation strives to safeguard the Gates of the Mountains region for generations to come.

The Gates of the Mountains Foundation will award a **\$2,000.00** scholarship per year for two consecutive years to the successful Applicant. (Total amount of \$4,000.00 over two years)

- This award is limited to an undergraduate student that will be enrolled in an accredited public or private Montana college, university, technical or trade school.
- To be eligible, an applicant must be a graduating high school student from the **Helena Public School system, East Helena Public School system, or a Helena student having received his/her GED and not over 21 years of age.**
- **DEADLINE:** The application **must be received** by the **Foundation Selection Committee, 2234 Gold Rush, Helena, MT 59601, “on or before” May 1st of the applicant’s high school graduation year. Exceptions may be granted for eligible GED graduates.**
- The application will be graded on FINANCIAL NEED, DEFINED GOALS, along with scholastic achievement, school and extracurricular activities, CHARACTER and LEADERSHIP.
- The scholarship committee reserves the right to retain the application. It is not intended that the application information be made public, however the scholarship committee reserves the right to announce the scholarship winner.
- A check in the amount of **\$2,000.00** will be issued to the accredited Montana college, university, technical or trade school the successful applicant has enrolled. **This amount is earmarked for tuition and fees needed to support applicant’s fulltime status.**
 - To receive the second year of this two year scholarship the applicant must provide proof of completion of year one as a **fulltime student in good standing** and a **plan of study as a fulltime second year student by June of year one.**

The following items must accompany the application: (NOTE: incomplete applications will not be considered)

1. A personal letter summarizing the *applicant’s intended use of funds*, their *goals in education* and their *financial need* plus *areas of involvement* and/or *circumstances* this application has not allowed you to address that may enhance your selection. Please limit to 500 words max.
2. **Two** letters of reference from a teacher, clergy, employer or other person well acquainted with the applicant, none of whom are related to the applicant.
3. A transcript of grades, current to the time of application. Applicant must have a 2.0 GPA or above or successfully completed a GED certification.



GATES OF THE MOUNTAINS FOUNDATION SCHOLARSHIP APPLICATION:

1. Name (last) _____ (first) _____ (middle) _____
2. Home Address _____
 - a. City _____ State _____ ZIP _____
 - b. Mailing Address _____
3. Phone: Home _____ Cell _____
4. Email address: _____
5. Date of Birth _____ Place _____
6. High School Attended _____
 - a. Location _____ Graduation year ____
7. Cumulative Grade Point Average to date _____
8. Attach additional page(s) for items #9, #10, & #11
9. High School Activities and Offices Held:
10. Other Activities and Offices Held **NOT** associated with high school:
11. Employment, past and present, and number of hours worked per week.
12. College, University, Trade/Technical school contemplated:

 - a. Proposed Major _____
 - b. Intended Vocation _____
13. Estimate of finances, in dollars, needed during first college year:
 - a. Tuition & Fees \$ _____
 - b. Books & Supplies \$ _____
 - c. Board & Room \$ _____
 - d. Personal Requirements: \$ _____
 - e. TOTAL EXPENSES: \$ _____
14. Expected personal resources during the year. Income from these sources will not disqualify the applicant, but will be considered along with other factors.
 - a. Savings or Funds on hand \$ _____
 - b. Revenue available from employment \$ _____
 - c. Parents contribution \$ _____
 - d. Other \$ _____
 - e. TOTAL RESOURCES: \$ _____
15. Line 13 total less Line 14 total equals estimated need for year: \$ _____

16. Father's name _____ Residence _____
 a. Phone and Email: _____
17. Mother's name _____ Residence _____
 a. Phone and Email: _____
18. Guardian(if any) _____ Residence _____
 a. Phone and Email: _____

STATEMENT BY APPLICANT:

I hereby certify that I am in need of the financial aid requested to continue my education. If granted, I will use the proceeds to apply on ***the payment of tuition and fees*** as needed to support my fulltime status as a student.

Date _____ Applicant Signature _____

STATEMENT BY PARENT OR GUARDIAN:

I understand the above applicant is applying for a Gates of the Mountains Foundation Scholarship and I have no objection to his/her pursuit. I have read this application and attest to the accuracy.

Date _____ Signature _____ Relationship _____

Phone: _____

Mail application to: (NOTE: application must be **received on or before May 1st**)

Gates of the Mountains Foundation Scholarship Committee
 2234 Gold Rush
 Helena, MT 59601



Scholarship Committee use only:

- Date received: _____
- Reviewed by: _____
- Comments: