The Michael Guthridge/Jeramy Vargocko Memorial Scholarship is awarded to seniors who are active in community service work. Michael and Jeramy were involved in community service work. Michael and Jeramy were involved in several different areas of the community through church, 4-H, and school activities. If asked to help organizations or individuals in the community, they were always willing to assist in any way that was needed. Their assistance ranged from doing physical activities to just being there and listening to someone who needed to talk or giving encouragement to someone who was having difficulties. They were individuals who put others first, showing others that someone cared for them. They did not always know the person whom they were helping but it did not matter – there was someone with a need and they could fulfil that need.

Scholarship Requirements:

1. Must have at least a “C” average (3.0/5.0)
2. Must be a current year graduate of CUSD #5
3. Must be planning to attend post-secondary, vocational, or academic program, beginning by the third fall following graduation.

Applicants will be evaluated based on the following criteria:

1. Accumulated school and community activities
2. A variety of other diversified activities
3. Potential to benefit from the opportunity to improve themselves and ultimately contribute to their future.

Return application to Mrs. Nelk by deadline on website.

Winner of scholarship will be announced on Honors Night.

MICHAEL GUTHRIDGE & JERAMY VARGOCKO MEMORIAL SCHOLARSHIP

Name:

Address:

City: State: Zip:

Telephone:

Post Secondary School Attending:

Planned Date of Attendance:

Field of Study:

Complete a personal statement setting forth your reason for applying for the scholarship and your goal for the future (one or two pages suggested):

List your school & community activities: (organizations, clubs, sports teams, memberships, or communities)

List any school or community offices held, honors, awards, other accomplishments:

I hereby agree to use the money to pay tuition, fees, or other direct educational expenses at the school I attend, and I agree to return the scholarship in full if I do not attend school.

Signature of student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_