

# SCHOLARSHIP PROGRAM APPLICATION MEMBER COOPERATIVE

## Basin Electric Power Cooperative - Member Cooperative Scholarship Program

### Scholarship Submittal Requirements

The student is responsible for submitting all materials on time. Incomplete applications will not be evaluated.

- ☐ 1. Complete this application (*attach additional sheets if necessary*). Your name and address should be on all attachments. Completeness and neatness ensure your application will be evaluated appropriately.
- ☐ 2. Recent academic transcript whether it is from a high school, college, university, or trade school. CURRENT COLLEGE FRESHMAN - Judges will screen and require more than one semester or quarter of grades. If this applies to you, submit your high school transcript.
- ☐ 3. Copy of your college entrance examination (*ACT and/or SAT*) scores. (*College Freshman Only*)
- ☐ 4. **Essay** - How does the electricity provided by your electric cooperative improve the quality of life in your community?
- ☐ 5. Applicant appraisal.
- ☐ 6. Send this application and all supporting documentation to Powder River Energy Corporation (PRECorp). (*PRECorp will be responsible for selecting finalists in these categories*).
  - Cooperative applications MUST be sent to PRECorp.

**Return this completed form to Powder River Energy, PO Box 930, Sundance, WY 82729; or email to: [communications@precorp.coop](mailto:communications@precorp.coop).** Submission deadline to PRECorp is **January 30, 2026**.

*All scholarship entries are confidential and will only be viewed by the Basin Electric Power Cooperative or the PRECorp selection committee.*

### Applicant Information

|                                                                                         |  |                                                                                                              |                |                        |
|-----------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------|----------------|------------------------|
| Applicant Name:                                                                         |  | Home Phone:                                                                                                  | College Phone: | Last 4 Digits of SSN#: |
| Permanent Address ( <i>Street/PO Box</i> ):                                             |  | City:                                                                                                        | State:         | Zip:                   |
| Mother's Name:                                                                          |  | Father's Name:                                                                                               |                |                        |
| Student's Parent is:                                                                    |  | <input type="checkbox"/> Member Cooperative Employee<br><input type="checkbox"/> Member Cooperative Consumer |                |                        |
| Cooperative System Name:                                                                |  |                                                                                                              |                |                        |
| Cooperative Location ( <i>City, State, Zip</i> ):                                       |  |                                                                                                              |                |                        |
| High School Name and Address from which you graduate or will be graduating this spring: |  |                                                                                                              |                |                        |
| Activities, Community Involvement, Achievements, and/or Honors:                         |  |                                                                                                              |                |                        |

*Information such as schooling, achievements, and career plans may be used for publicity purposes.*

Sending a resume does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. **DO NOT** repeat information already reported on the application form. Your name, address, and name of this scholarship program should be included on all attachments.

### Work Experience

Describe your work experience (e.g. food server, babysitting, lawn mowing, and office work). Indicate dates of employment for each job and approximate number of hours worked each week.

| Employer/Position | From<br>(Mo/Yr) | To<br>(Mo/Yr) | Hours per<br>Week |
|-------------------|-----------------|---------------|-------------------|
|                   |                 |               |                   |
|                   |                 |               |                   |
|                   |                 |               |                   |
|                   |                 |               |                   |

### Goals and Aspirations

Write a brief summary of your plans as they relate to your educational and career objectives and long-term goals.

### Education

**High School Seniors** - must include a transcript and complete this section.

**Students currently or previously enrolled in college or vocational-tech schools** - must include college transcripts of grades. Completion of ACT and/or SAT tests is not necessary.

GPA: \_\_\_\_\_

ACT Scores:

English: \_\_\_\_\_ Math: \_\_\_\_\_ Reading: \_\_\_\_\_ Science: \_\_\_\_\_ Comp: \_\_\_\_\_

SAT I Scores:

Verbal: \_\_\_\_\_ Math: \_\_\_\_\_

### School

Name and address of accredited school you plan to attend in the fall of the year:

| Name | City | State |
|------|------|-------|
|      |      |       |
|      |      |       |

☐ 4-Yr. College or University

☐ 2-Yr. Community or Junior College

☐ Vocational-Technical School

What will your class status be this fall? ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

Major Course of Study:

Minors:

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| <b>Essay Question (Required)</b>                                                                                                                                                                                                                                                                                                                                                              |                                                |                                           |                                                 |                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|-------------------------------------------------|----------------------------------------|
| <p>As part of the application, you are required to compose and submit an essay. The essay should be no more than one page, typed with a font size no smaller than 12 point, and double-spaced on 8 ½ X 11" size paper. Include your name on the top right-hand corner of the essay.</p>                                                                                                       |                                                |                                           |                                                 |                                        |
| <p>How does the electricity provided by Powder River Energy improve the quality of life in your community?</p>                                                                                                                                                                                                                                                                                |                                                |                                           |                                                 |                                        |
|                                                                                                                                                                                                                                                                                                                                                                                               |                                                |                                           |                                                 |                                        |
| (Applicant Signature)                                                                                                                                                                                                                                                                                                                                                                         |                                                |                                           | (Date)                                          |                                        |
| <b>Applicant Appraisal (Required)</b>                                                                                                                                                                                                                                                                                                                                                         |                                                |                                           |                                                 |                                        |
| <p><u>To the applicant:</u> This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.</p>                                                                                        |                                                |                                           |                                                 |                                        |
| <p><u>To the adult appraiser:</u> You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to the applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. <b>A letter of recommendation does not replace this section.</b></p> |                                                |                                           |                                                 |                                        |
| The applicant's choice of a post-secondary educational program is:                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Extremely Appropriate | <input type="checkbox"/> Very Appropriate | <input type="checkbox"/> Moderately Appropriate | <input type="checkbox"/> Inappropriate |
| The applicant's achievements reflect his/her ability:                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Extremely Well        | <input type="checkbox"/> Very Well        | <input type="checkbox"/> Moderately Well        | <input type="checkbox"/> Not Well      |
| The applicant's ability to set realistic and attainable goals is:                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Excellent             | <input type="checkbox"/> Good             | <input type="checkbox"/> Fair                   | <input type="checkbox"/> Poor          |
| The quality of the applicants commitment to school and/or community is:                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Excellent             | <input type="checkbox"/> Good             | <input type="checkbox"/> Fair                   | <input type="checkbox"/> Poor          |
| The applicant is able to seek, find, and use learning resources:                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Extremely Well        | <input type="checkbox"/> Very Well        | <input type="checkbox"/> Moderately Well        | <input type="checkbox"/> Not Well      |
| The applicant demonstrates curiosity and initiative:                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Extremely Well        | <input type="checkbox"/> Very Well        | <input type="checkbox"/> Moderately Well        | <input type="checkbox"/> Not Well      |
| The applicant demonstrates good problem-solving skills, follows through, and completes tasks:                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Extremely Well        | <input type="checkbox"/> Very Well        | <input type="checkbox"/> Moderately Well        | <input type="checkbox"/> Not Well      |
| The applicant's respect for self and other is:                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Excellent             | <input type="checkbox"/> Good             | <input type="checkbox"/> Fair                   | <input type="checkbox"/> Poor          |
| Comments:                                                                                                                                                                                                                                                                                                                                                                                     |                                                |                                           |                                                 |                                        |
|                                                                                                                                                                                                                                                                                                                                                                                               |                                                |                                           |                                                 |                                        |
|                                                                                                                                                                                                                                                                                                                                                                                               |                                                |                                           |                                                 |                                        |
|                                                                                                                                                                                                                                                                                                                                                                                               |                                                |                                           |                                                 |                                        |
| Appraiser's Name:                                                                                                                                                                                                                                                                                                                                                                             | Title:                                         | Organization:                             | Phone No.:                                      |                                        |
|                                                                                                                                                                                                                                                                                                                                                                                               |                                                |                                           |                                                 |                                        |
| (Appraiser Signature)                                                                                                                                                                                                                                                                                                                                                                         |                                                |                                           | (Date)                                          |                                        |

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