

# Edward Slettom Cooperative Leadership Scholarship 2017 Scholarship Application for High School Students

The Minnesota Cooperative Educati	on Foundation scholarsl	nip is available to	Minnesota residents who	are seniors graduating
from high school, interested in caree	ers relating to cooperative	es and are pursui	ng higher education at a tw	o or four year
institution. The award is based on sc	· 1	*	0 0	•
will be awarded to a winning applicant		1,	,	"
Name: Last	First, Middl	First, Middle Telephone Num		er
			( )	
Street Address/P.O. Box	City	State	Zip Code	
E-mail Address			Fax Number	
			( )	
Hometown Newspaper Name:	Phone:	Fax:	E-mail:	
College Attending	City		State	Zip Code
Current GPA/Class Rank				
Are you or your immediate family a member of a co-op? Indicate all that apply. If so, which cooperative(s)?				
Yes, I am Yes, my immediate family No, I/	we are not			

#### Your application must include:

- This completed application form. Your application must be typed, not handwritten.
- Your current school transcripts.
- Two completed recommendation forms from current or former employers, school officials, professors, mentors, etc.
- ➤ Should you choose to submit your application using the video essay option (Option #2), your transcripts and two completed recommendation forms are also required to be considered a complete application.

Please note: Your application will not be considered complete unless all the above materials are received. Should you be awarded the scholarship, you will be asked to provide a one paragraph biography about yourself, as well as a photo for a press release.

Applications are due on May 1, 2017 to charlene.vrieze@cooperativenetwork.coop or:

Minnesota Cooperative Education Foundation 145 University Ave. W., Ste. 450 St. Paul, MN 55103-2044 www.mcef.coop

Questions or concerns? Please contact Charlene Vrieze at 651-209-8895 or charlene.vrieze@cooperativenetwork.coop.

How will this scholarship help you?
ACTIVITIES  Attach additional sheets if necessary.
Describe any co-op-related and leadership programs, activities or projects you have been involved in.
In your opinion, why are cooperatives important to our communities? What role do you see cooperatives taking in the future in Minnesota?
What are your career goals upon graduation, and how do they relate to co-ops? Please explain why you are pursuing a career that will involve co-ops.

## VIDEO ESSAY (Option #2)

We are excited to offer scholarship applicants the opportunity to move outside of the traditional essay format. If you would prefer, you can answer the essay questions from option one above in a video format and submit the video in digital format with the application. You should burn the completed video onto a DVD or CD. The project can answer the questions as creatively as you choose, but please make sure each of the questions is touched on during the short video. The strongest videos will (1) explain your relationship with co-ops, (2) educate viewers on why co-ops are important to your community and the state, and (3) do all this without you simply standing in front of a camera and speaking your answers. Note: Once submitted, videos become property of Minnesota Cooperative Education Foundation and Cooperative Network and may be uploaded onto the organizations' websites and/or social media.

### APPLICATION SIGNATURE AND CONSENT

To the best of my knowledge, the material contained in this application is true and complete.

If I am selected as a recipient of this scholarship, I give my consent to the Minnesota Cooperative Education Foundation and Cooperative Network to disclose my name for use in press releases and other communications promoting the Minnesota Cooperative Education Foundation.

Signature	Date



# Edward Slettom Cooperative Leadership Scholarship 2017 Recommendation Form

NOTE TO STUDENT: Please have two people complete <u>separate</u> copies of this evaluation form. These references must not be relatives, but need not be school officials.

**NOTE TO EVALUATOR:** We would appreciate your observations and opinions about the applicant in the following areas. Your evaluation will be given considerable attention by the selection committee. Please be as specific and objective as possible. Include specific examples when possible. *This information will be treated in a confidential and professional manner.* 

Evaluator Name	Title
Organization	Phone
E-mail address	
Cooperation: Consider willingness and ability to	work with people in various capacities.
<b>Leadership:</b> Consider ability to motivate a group individual's leadership traits.	o of people in a desired direction. Please comment on the
	sider the applicant's potential in terms of his/her career goals, as developed any expertise in the area of cooperative businesses,
Additional Comments:	
Signature of Reference:	
Date:	