

**APPLICANT INFORMATION**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Initial \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

State: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

( \_\_\_\_ )

**HIGH SCHOOL INFORMATION**

School Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

Counselor Name: \_\_\_\_\_

( \_\_\_\_ ) \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

**POST GRADUATION DATA**

Institution Name: \_\_\_\_\_

Scheduled Date

of Enrollment: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Type: 2 yr. Community College \_\_\_\_\_ 4 yr. College/University \_\_\_\_\_ Trade School \_\_\_\_\_ Other \_\_\_\_\_

Major/Occupational Study (if known): \_\_\_\_\_

---

## COMMUNITY SERVICE AND SCHOOL ACTIVITIES

Please attach a list of the volunteer activities and school activities in which you have participated. Using the format given below, indicate the name of the activity or organization, your role, when you were involved, and the average number of hours per month you participated. Also include the name and contact number for the person (non-family member) who can verify your participation and role in the listed activities. Below are examples of the type of information to be provided. Please **do not** include information about any paid work positions.

Activity	Role	from month/year	to month/year	Avg. # hours per month	Contact name	Contact phone
Habitat Build	Participant	6/2000	8/2000	20	Ms. Lake	(123) 222-2345
Nursing Home Visitation, Group Party	Organizer	12/1997	Present	2	Ms. Brown	(123) 246-8888
Barrier Reef Park Clean up	Group Leader	5/2001	8/2002	15 during summers	Kaye Smith	(123) 357-1122
Calgary High School Feeding the Homeless	Initiator, Server	9/1998	6/1999	10	Mr. Jones	(123) 246-0001
Basketball	Co-captain	9/1999	Present	12 during season	Mr. Dixon	(555) 555-3456
Drama Club	Various parts	10/2001	3/2002	10	Ms. Kelly	(555) 555-7890

---

## LETTERS OF VERIFICATION

Please have up to three (3) non-family members attach **no more** than a **one-page** explanation of your role in one of the activities or projects listed above. The write up should identify your personal impact and contribution to the project or activity, the amount of time you spent involved in the project and why you should be considered for this scholarship. The write up should be signed and dated by the individual submitting the information, and should include their title and contact data.

---

## ESSAY

Please attach your essay of 1,000 words or less describing the volunteer project that has been the most rewarding community service activity you have participated in and why it was so important to you. Include in the essay the following items:

- ✓ Describe your role in the project.
- ✓ Time you spent on the project – hours, days, etc.
- ✓ Is project a one time or on-going project?
- ✓ Impact of the project on your personal life.
- ✓ Explain why you feel your involvement in the project enabled you to apply for this scholarship.

---

## SCHOOL OFFICIAL'S CERTIFICATION

Applicant must include a complete high school transcript of grades through the junior year and any official grades received during the current senior term. Please have this section completed by the appropriate school official.

A minimum of a 2.50 GPA on a 4.0 grade scale, a minimum of a 3.10 GPA on a 5.0 grading scale, or a minimum of 80 points out of 100 on a numerical cumulative scale is required at the time of application.

Cumulative grade point average : \_\_\_\_\_ on a \_\_\_\_\_ grade point scale.

Cumulative numerical grade \_\_\_\_\_.

School Official's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Title: \_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_

---

## PIONEER DATA

Member Name: \_\_\_\_\_ Sponsor Company \_\_\_\_\_ E-Mail: \_\_\_\_\_

Pioneer Status: Regular Member \_\_\_\_\_ Life Member \_\_\_\_\_ Chapter Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

---

## APPLICANT'S & PIONEER'S CERTIFICATION

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. I certify that I am a relative of the Pioneer and agree to give proof if required. I also understand, falsification of any information will result in disqualification of this application. I also understand and agree that this application becomes the property of Pioneers. I understand that this application will be assessed based on information provided and submission of this application does not guarantee that I will receive a scholarship and that the decision of Pioneers is final. I further agree that in the event I am a scholarship recipient, this form also serves as a release to use my name, photographs, biographical information and excerpts from my application and related material in press releases and other publications announcing and promoting this scholarship program.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Pioneer's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

---

Confirmation of receipt of an application will be sent to the applicant's email or home address. If you do not receive confirmation, you may call 800-976-1914.

Applicants will be notified whether or not they will be granted a scholarship. Decisions of Pioneers are final.

\*\*Please indicate your notification preference: U.S. Mail \_\_\_\_\_ Email \_\_\_\_\_

---

## APPLICANT CHECKLIST

Be sure you have included all requested information. Incomplete applications will **NOT** be considered.

- 1) Completed application including signature of applicant and Pioneer family member.
  - 2) One-page list of community service and school activities.
  - 3) At least one but no more than three one-page letters of verification of your activities and involvement.
  - 4) Personal essay.
  - 5) Official high school transcript.
  - 6) Official school certification on application.
  - 7) Remember: Application must be postmarked no later than **February 28, 2009**
- 

**MAIL APPLICATION & ATTACHMENTS TO:** Pioneers Scholarship Plan Administrator  
930 15<sup>th</sup> Street, 12<sup>th</sup> Floor  
Denver, CO 80202  
(303) 571-1200