

## Northeastern REMC A Touchstone Energy® Cooperative

## Northeastern REMC Scholarship Application

GENERAL INFORMATION				
First Name:		Last Name:		Male Female
Date of Birth : /	1	Primary Parent/Guardian cell phone:	( )	
Mailing address:		City:	Sta	ate: IN ZIP:
Parent's/Guardian's name(s):				
Parent phone: ( )	-	Parent Email address:		
MEMBER ACCOUNT INFORMATION				
Name on Northeastern REMC	Account:			
Account Number:				
Address on Account:				
SCHOOL INFORMATION				
Name of high school from which	ch you graduated or will gra	aduate:		
Accredited school you will be a	attending in the fall:			
What will be your major course	e of study?			
Current GPA:	GPA Used	d:		
High School Rank:	Number in Class	s: ACT/SAT Score	es:	



## **WORK EXPERIENCE, EXTRACURRICULAR & COMMUNITY EVENTS**

On a separate sheet, please list any work experience, school-related and/or community activities/honors.

SCHOLARSHIP APPLICATION AFFIDAVIT	
	, hereby agree that the attached application submitted to Northeastern  the best of my ability and knowledge, and must be at Northeastern REMC's  18. I am also aware that any funds received from this scholarship must be d institution.
Applicant's Signature:	Date:
STATEMENT OF PARENT OR GUARDIAN	
We have examined this application, including accompanyi complete.	ng submissions, and to the best of our knowledge and belief, it is true and
Parent's Signature:	Date:

Submit all application materials to:
Michael DeFreeuw
Director, Marketing & Communications

Northeastern REMC 4901 East Park 30 Drive, Columbia City, IN 46725 (260) 625-3700/244-6111