COMPLETE APPLICATION IN ITS ENTIRETY – PLEASE TYPE OR PRINT CLEARLY

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| ELIGIBILITY REQUIREMENTS  |
| [ ]  Applicant will have graduated from an accredited South Dakota high school by spring of 2025. [ ]  Applicant must apply within 5 years after high school graduation or within 1 year after release from active military duty.  (if that release is within 5 years of high school graduation) [ ]  Applicant must be an enrolled member of an American Indian tribe. [ ]  Applicant will attend a public or non-public accredited university, college or technical college located in South Dakota.  |
| APPLICANT PERSONAL INFORMATION  |
| APPLICANT’S NAME: HOME ADDRESS: PHONE: BIRTH DATE: EMAIL: APPLICANT GRADUATED FROM AN ACCREDITED SOUTH DAKOTA HIGH SCHOOL: [ ]  YES [ ]  NO HIGH SCHOOL GRADUATION OR GED DATE:APPLICANT IS AN ENROLLED MEMBER OF AN AMERICAN INDIAN TRIBE. [ ]  YES [ ]  NO Name of Tribe you are currently enrolled in: \* An official tribal verification is required, please attachAPPLICANT INTENDS TO ATTEND A PUBLIC OR NON-PUBLIC ACCREDITED UNIVERSITY, COLLEGE OR TECHNICAL INSTITUTE LOCATED IN SOUTH DAKOTA TO BE ELIGIBLE FOR THIS SCHOLARSHIP: [ ]  YES [ ]  NO DATE OF RELEASE FROM ACTIVE MILITARY: Have you received a Hagen-Harvey scholarship before: [ ]  YES [ ]  NO  If yes, in what year: Have you ever been convicted of a drug offense? [ ]  YES [ ]  NO  |
| PARENT/GUARDIAN INFORMATION – if applicable  |
| PARENT/GUARDIAN NAME: MAILING ADDRESS: EMAIL: PHONE: PARENT/GUARDIAN NAME: MAILING ADDRESS: EMAIL: PHONE:  |

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| SCHOOL INFORMATION |
| HIGH SCHOOL: TYPE OF SCHOOL: [ ]  PUBLIC [ ]  PRIVATE SCHOOL ADDRESS: CITY: STATE: ZIP CODE: SCHOOL PHONE: CURRENT HIGH SCHOOL SENIOR: [ ]  YES [ ]  NO GRADUATION YEAR: [ ]  2020 [ ]  2021 [ ]  2022 [ ]  2023 [ ]  2024 [ ]  2025NON-WEIGHTED GPA: ACT COMPOSITE SCORE ( if available ):  |
| EXTRACURRICULAR ACTIVITIES |
| PLEASE LIST COLLEGE/POSTSECONDARY AN HIGH SCHOOL ACTIVITIES ( student government, sports, publications, school-sponsored service programs, student-faculty committees, arts, music, etc.)  |
| COMMUNITY SERVICE |
| PLEASE LIST PUBLIC SERVICE AND INDIGENOUS CULTURAL COMMUNITY ACTIVITIES ( homeless services, environmental protection/conservation, advocacy activities, work with religious organizations, etc. ) Please do not repeat items listed previously.  |
| POSTSECONDARY EDUCATION |
| College/postsecondary school you are planning to attend in 2025-2026 (Institution must be in South Dakota). Name of Institution: City: State: Zip Code: Currently Undecided – Please list institutions under consideration:  I am currently attending a post-secondary institution: [ ]  First Year [ ]  Second Year [ ]  Third Year [ ]  Fourth Year Name of South Dakota postsecondary institution you are attending: (Arrange to send a current transcript to Melissa.Bothun@state.sd.us at the Department of Education) Degree(s) you are pursuing: Profession or field of employment you wish to enter with your college degree: Anticipated year of college graduation: List any other postsecondary institutions you have attended: (Arrange to send a current transcript from each postsecondary institution to Melissa.Bothun@state.sd.us at the Department of Education) Institution: City: State: Years Attended: Institution: City: State: Years Attended:  |
| PERSONAL ESSAY - What does the scholarship committee need to know about you in 1,000 words or less? |
| Please attach your essay to this form. The essay is limited to no more than 1,000 words (two print pages or approximately 6,000 characters). Recommendation: Carefully proof your essay and know that well-done short essays are admired. THE COMMITTEE MEMBERS WILL BE ESPECIALLY INTERESTED IN THESE POINTS PERSONAL QUALITIES: your most notable qualities CULTURAL ACTIVITIES: cultural activities you are involved in LEADERSHIP: examples of your leadership abilities FUTURE GOALS: What is your attitude toward future educational goals? What do you hope to do, and what position do you hope to have, upon completing your studies? SCHOLARSHIP APPLICATION: Explain why you deserve to receive a Hagen-Harvey Memorial Scholarship.  |
| REQUIRED ATTACHMENTS/DOCUMENTS |
| COMPLETED HAGEN-HARVEY APPLICATION FORM [ ]  ATTACHED / INCLUDED HIGH SCHOOL TRANSCRIPT [ ]  ATTACHED / INCLUDED TRANSCRIPT(S) FOR ANY POSTSECONDARY COURSES COMPLETED [ ]  ATTACHED / INCLUDED TWO LETTERS OF RECOMMENDATION [ ]  ATTACHED / INCLUDED VERIFICATION OF CURENT TRIBAL ENROLLMENT [ ]  ATTACHED / INCLUDED COPY OF ACT SCORE ( if available ) [ ]  ATTACHED / INCLUDEDPERSONAL ESSAY [ ]  ATTACHED / INCLUDED  |
| CERTIFICATION STATEMENT |
| By signing my name below, I confirm that all the information provided above and in the accompanying documents is true and correct to the best of my knowledge. Incomplete applications will not be considered. (No application will be complete until receipt of all required transcripts, letters of recommendation and other required documentation are received.) I authorize officials of my high school or college to verify the information submitted with this application and to release this information to the South Dakota Department of Education. I authorize the South Dakota Department of Education to release information from the application materials to the news media should I be awarded a Hagen-Harvey Scholarship. If I am awarded a scholarship and participate actively in the program, I further authorize college/postsecondary officials to release my grade reports and cumulative transcript, as well as my current directory information, to the South Dakota Department of Education for purposes of establishing my continuing eligibility to participate in the program and for purposes of research concerning program effectiveness.  APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signature of Parent/Guardian is required if applicant is under 18 years of age.)  |
| APPLICATION SUBMISSION |
| APPLICATION DEADLINE: February 28th, 2025 Applications submitted electronically must be received by 5:00 PM CST. Applications mailed must be postmarked by the stated deadline.  APPLICATION AND REQUIRED ATTACHMENTS MAY BE EMAILED TO: Melissa.Bothun@state.sd.us.  APPLICATION AND REQUIRED DOCUMENTS MAY BE MAILED TO: Melissa Bothun Department of Education 800 Governors Drive Pierre, SD 57501  QUESTIONS MAY BE DIRECTED TO: Melissa.Bothun@state.sd.us 605-295-0433  |