	F		Chinook, MT 59523 6-2027	
Applicants Last Name:		First Name:	MI:	
Maiden Name:		Year Graduate	d from CHS:	
Mailing Address:		Street:		
City:	State:	Zip:	Phone:	
Preferred	Correspondence:	Hardcopy	Email Email Addres	ss:
School Yo	u Will Be Attending:			
Current N	lajor/Area of Study:			
Fill in A o	r B as it applies to you	ı (fill in only o	ne):	
A.I	Parents/Guardians:			Phone:
В.5	Spouse:			Phone:
De	ependants:			
Please list i	ndividuals you requeste	d to submit lett	ers of recommendation	ns. (Name and Full Addresses)
No	te: First time applicants	need three let	ters; second and subse	equent applicants only need one.
1)	Name:			
	Address:			
	City, State, Zip:			
2)	Name:			
	Address:			
	City, State, Zip:			
3)	Name:			
	Address:			
	City, State, Zip:			
Awards a	nd Honors			
1)				
2)				

Lloyd D. Sweet Educational Foundation Application Form

Community Service/Volunteerism

How do you actively contribute to your community?

Post-Secondary Educational Summary

List college, trade schools, etc., that you have attended or are attending. List them in order by years of attendance from the first school attended after high school to the one you are currently attending. Also indicate major areas of study.

YEAR	SCHOOL	FIELD OF STUDY

Finance Report

Please fill these areas out as accurately as possible. List realistic and specific contributions for further education only for the 2026-2027 academic year. <u>Total funds available estimate should equal total expense estimate</u>.

Student's or Parent's Contributions	\$
Veteran's Benefits	\$
Grants, Scholarships, Student Loans	\$
Total Funds Available Estimate	\$
Tuition and Fees	\$
Books and Services	\$
Student's Room and Board	\$
Total Expense Estimate	\$

Please consult the college brochure for these items.

Transcript

An official transcript from high school, college or other educational institution must be submitted to the selection committee as a part of this application. (Include the most recent transcript with your application i.e. If you are a junior in college, you should have a completed transcript of all classes from your freshman, sophomore, and junior years. If you have never attended college, you must secure a copy of your high school transcript from the high school office. A grade report or a computer printout of your transcript will not be accepted. Failure to provide official transcripts will automatically disqualify an individual from scholarship consideration.

Employment

List all employment that you have had the past four years, indicating both for whom you worked and the type of work performed. Include jobs during the school year, as well as summer work.

EMPLOYER	PERIOD EMPLOYED	TYPE OF WORK		

Financial Aid Records

Have you applied for and/or been the recipient of any other scholarships or financial aid? If yes, please list the award(s) and year(s). List the amounts of financial aid applied for and/or scholarship waivers. BE ACCURATE. (Begin with high school scholarship awards.) List previous Lloyd D. Sweet Scholarships also.

TYPE OF AID	YEAR RECEIVED	AMOUNT

Please **TYPE** a one-page essay summarizing your future plans including your field of study at college, future job preference and time frame for completing these goals. Explain how your abilities, natural skills, previous education and job experiences will lend themselves to the completion of the plans expressed in the essay.

Lloyd D. Sweet Educational Foundation Recommendation Form 2026-2027 Academic Year

Name of Applicant:					
Name of Evaluator: _	Signature:				
Evaluator's Occupation	on:				
A. In what capacity h	ave you known thi	s applicant?			
Teacher.	Counselor	Employer	Friend	Coach	Other
B. Please check only	one evaluation rat	ing in each sectio	on.		
**Comments are he	lpful in the evalua	ition process. Ple	ease take some	time to wri	te additional
comments about the	e applicant. Use ba	ick of sheet if ne	cessary.		
1. Quality of Work: Appl	icant is neat, thorough,	competent and uses	his/her skills and ab	oilities on assig	nments or tasks.
Excellent	Above Average	Average	Below Ave	rage P	oor
2. Communications: Appli expression abilities. Excellent	cant is cooperative with Above Average	n associates, is courte Average	ous and respectful, Below Ave	-	oral and written
3. Work Habits: Applican Excellent	t uses time and materia Above Average	ils efficiently, is reliat Average	ile, punctual, depen Below Ave		ows instructions. OOr
4. Initiative : Applicant con Excellent	npletes assignments, is Above Average	enthusiastic, and per Average	severes on develop Below Ave		at hand. OOr
5. Volunteerism: Applicar others by example. Excellent	nt is available whenever Above Average	work needs to be do	ne, sees tasks throu Below Ave		ion, and inspires OOr

Evaluator: The above-named applicant is seeking your support to obtain a Sweet Scholarship. This form needs to be submitted with the application materials. You should be provided with a self-addressed envelope to seal your remarks and then sign your name over the flap. The applicant should arrange with you to have you mail or return this to him/her. Thank you for sharing your insights on this applicant.