



## Rehle Higham Scholarship Fund

**Deadline: April 15th**

<u>Who Can Apply?</u>	<u>Required Application Materials</u>
<ul style="list-style-type: none"> <li>-Graduating senior at Shelley High School</li> <li>-Enrolling in an institution of higher learning directly after completion of high school career;</li> <li>-Those who have participated in Art or Dance</li> <li>-Consideration is also given to honors and awards received, recognition given in scholastic, community, and artistic or dance activities.</li> </ul>	<ul style="list-style-type: none"> <li>-Copy of your most recent high school transcript;</li> <li>-A written statement (1-3 pages in length) addressing the following:               <ul style="list-style-type: none"> <li>*Educational/Career goals and objectives</li> <li>*Extra-curricular activities, volunteerism, awards, honors, and/or offices held;</li> <li>*Work experience, and if you plan to work while attending college;</li> <li>*Why you should be selected for this scholarship</li> </ul> </li> <li>-For artists, a photograph portfolio including 8-10 pictures of completed artworks, including a caption with the name and medium, with an additional 5 pictures from your sketch book or of works in progress in other mediums. These photographs must all be saved in a single PDF file.</li> <li>-For dancers, a video no longer than 3 minutes of a past performance, a collage of performances, OR a choreographed dance created by you specifically for this scholarship.</li> </ul>
<b>Note: You do not have to major in art or dance to receive this scholarship.</b>	

Application Instructions:

- Complete this application and attach the *Required Application Materials* listed above.
- Combine ALL materials into a single PDF attachment. Google docs will not be accepted.**
- Email completed PDF applications to [shelleyartsidaho@gmail.com](mailto:shelleyartsidaho@gmail.com) *no later than 11:59pm MST on April 15th*. Late/Incomplete applications will not be considered.

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**APPLICANT INFORMATION**

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

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

City/State/Zip: \_\_\_\_\_

Permanent Address (if different than above): \_\_\_\_\_



Shelley High School Senior  
APPLICATION

GENERAL INFORMATION

Name		Date of Birth		Male	Female
Father's/Guardian's Name		Mother's/Guardian's Name		<input type="checkbox"/>	<input type="checkbox"/>
Address	City	State	Zip		
Cumulative GPA (2.8 Minimum Required)	University/College	Major			

Please List Any Extracurricular Activities, Clubs, Honors, Awards, or Offices Held During High School:

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COMMUNITY INVOLVEMENT

Please List Any Community Service, e.g., Humanitarian/Church/Volunteer Service:

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PERSONAL ESSAY

On a separate page, share some additional information about yourself. For example: How would this scholarship benefit you? What are your educational/career/life goals? Tell us something surprising about yourself. What is the most difficult thing that you've had to overcome? What do you love to do in your spare time? What do you feel passionately about? What makes you unique?

INCLUDE THE FOLLOWING

- Two (2) Letters of Recommendation
- Essay
- Copy of your Student Aid Report (Copy of Full FAFSA Report)

**DEADLINE FOR SUBMISSION: APRIL 15TH, 11:59PM MST. LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

SUBMIT APPLICATIONS TO [SHELLEYARTSIDAHO@GMAIL.COM](mailto:SHELLEYARTSIDAHO@GMAIL.COM)

APPLICATIONS MUST INCLUDE ALL REQUIRED MATERIALS IN A SINGLE PDF DOCUMENT WITH THE EXCEPTION OF DANCE VIDEOS BEING SENT VIA A SHARED GOOGLE DRIVE FOLDER.

By submitting this application (written or electronically) I consent to the gathering, use and releasing of my information by the Shelley Supporters of the Arts as it relates to the funding of the scholarships. I understand the information is needed for the purpose of the scholarship payments and for normal business operations of the agency. This consent is valid for three years from the date signed, unless I revoke this consent, in writing, to the extent of the information already shared. I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Personal Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

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### SCHOOL INFORMATION

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

City/State: \_\_\_\_\_

High School Cumulative GPA: \_\_\_\_\_

Date of Graduation \_\_\_\_\_

Please list the post-secondary institution you plan to attend: \_\_\_\_\_

Have you been accepted? \_\_\_\_\_

What field do you plan to study? \_\_\_\_\_

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### CERTIFICATION

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By submitting this application (written or electronically) I consent to the gathering, use and releasing of my information by the Shelley Supporters of the Arts as it relates to the funding of the scholarships. I understand the information is needed for the purpose of the scholarship payments and for normal business operations of the agency. This consent is valid for three years form the date signed, unless I revoke this consent, in writing, to the extent of the information already shared. I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature (Typed or Written): \_\_\_\_\_

Date: \_\_\_\_\_

**If selected for a scholarship, you will be notified by email.**

### Questions?

Email [shelleyartsidaho@gmail.com](mailto:shelleyartsidaho@gmail.com) or call (208) 881-8025