The Doug Hoeft Scholarship
Douglas Hoeft Scholarship Foundation

APPLICATION DATA:
Name_____
(Last) (First) (Middle Initial)
Permanent Residence:_____
(Street Address) (City) (Zip)
Telephone:_____ Date of Birth___/____/_____ S.S. #_____
Cell Phone_____ e-mail address_____

HIGH SCHOOL DATA:
School Name:_____ Yr. Graduated:_____ Class Rank: _____

_____ Telephone:_____
(Street Address) (City) (Zip)

CERTIFICATION:
In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to submit proof of information I have given on these forms. Falsification of information may result in termination of any scholarship granted. This application and its attachments become the property of the Douglas Hoeft Scholarship Foundation.
Applicant's Signature_____ Date_____

PERSONAL PROFILE/ESSAY (Not more than one page each):
To assist the judging panel in their selections, each applicant shall submit a double spaced personal profile. This profile is to include detailed information of yourself, your educational and career plans and your goals. Describe any awards or honors that you have received. **Include a separate essay, doubled spaced, on the topic, "What are my challenges and how do I overcome them?"**

TEST DATA:
You must submit with this application a copy of your ACT/SAT scores.

LETTERS OF RECOMMENDATION:
You must submit with this application two letters of recommendation one from a principal, teacher, or counselor; and one from a non-related character reference or employer.

APPLICATION MUST BE POSTMARKED OR RECEIVED VIA THE WEBSITE NO LATER THAN APRIL 1
ACCREDITED VOCATIONAL/TECHNICAL SCHOOL OR INSTITUTION OF HIGH EDUCATION ATTENDING:
Name_____ Telephone_____