APPLICATION FOR EDUCATIONAL SCHOLARSHIP THE HATTERSCHEIDT FOUNDATION, INC 2026/27 SCHOOL YEAR

GUIDELINES

- The recipient must be a South Dakota Resident, graduating from a South Dakota High School or Homeschool.
- 2. This is a **One-Year scholarship**.
- 3. If a student **does not attend** post-secondary schools for **ANY REASON**, they will **forfeit** the remainder of the scholarship.
- 4. The recipient must be **planning to enroll in a full-time course of undergraduate study** at the institution selecting the scholarship recipients. Applicant must be accepted for admission to the specified school at which he or she is applying for the scholarship. Applicant must be a "full time student" or minimum of 12 credit hours to retain the scholarship.
- 5. The recipient must have a **cumulative grade point average** of <u>3.0 or higher</u> on a 4.0 scale. Homeschool students must have an ACT score of at least 18 or an equivalent SAT score.
- 6. The quality and appearance of the application will be taken into consideration.
- 7. All students must complete the <u>entire application</u> and provide a <u>complete official</u> transcript and <u>three current letters of recommendation</u>.
- 8. All documents must be received by the deadline provided by the institution or the application will not be considered. It is the student's responsibility to ensure the entire application, including transcripts and recommendation letters, is received. There will be NO EXCEPTIONS.
- 9. Applicants must show financial need and must apply for Federal Student Aid.
- 10. Recipients must submit a Thank You to the Board by July 1st or will lose their scholarship.

Scholarship recipients will be notified by letter on or before June 15, 2026. Checks will be distributed to the school of the scholarship recipients by the beginning of the fall 2026 term provided all scholarship requirements are met.

No candidate shall be denied being a recipient of a scholarship on the basis of race, creed, sex, religion, national origin, or any other basis, which is prohibited by Section 501(C) (3) of the Internal Revenue Code.

APPLICATION FOR EDUCATIONAL SCHOLARSHIP THE HATTERSCHEIDT FOUNDATION, INC.

2026/27 SCHOOL YEAR

ALL FIELDS AND SIGNATURES MUST BE COMPLETED TO BE ELIGIBLE.

If you are awarded a scholarship, you will be notified by Dacotah Bank via US Mail. For recipients of the award, a thank you note will be REQUIRED to be received by the Board no later than July 1.

1.	Name in fullSoc. Sec. #	
2.	Complete Permanent Mailing address (Street or Box)	
	(City, State, Zip Code)	
	Phone Number	
	Personal Email Address (not high school)	
3.	Date of BirthU.S. CitizenYesNo (if No – <u>STOP</u> , You MUST be a US Citizen to South Dakota residentYesNo (if No – <u>STOP</u> , You MUST be a SD resident to apply)	apply)
4.	Identification of Parent/Guardian (please complete both a & b or provide a reason for only completing a.Name	
	Present address or date of death	
	Occupation	
	b.Name	
	Present address or date of death	
	Occupation	
5.	Name of school or college you plan to attend:	
	Major subjects of study:Minor:	
7.	Name and complete address of high school currently attending:	
	Name: Phone #	
8	Date of high school graduation:	
	SAT Score OR ACT Score OR Other (explain)	
	DATE SCORE STATE OF THE SCHOOL TRANSCRIPT – FALL/2 ND QUARTER GRADE MUST BE INCLUDED (ORIGINAL SIGNATURE AND/OR SEAL REQUIRED)	
11	. Give names of the three individuals who wrote recommendation letters for you: (FROM A CURRENT PROFESSOR, TEACHER, EMPLOYER, ETC. RECOMMENDATIONS FROM FAM MEMBERS WILL NOT BE ACCEPTED) A	IILY
	B	
	C	
12	. Please write a brief autobiography (do not exceed 200 words) describing your experiences to date an	d
	indicating, at the end, your hopes and plans for the future. \Box	
13	Have you applied for a Hatterscheidt Fdn. Scholarship at more than 1 school/college/university? If yes, please give school name(s):	
	Date: Signature:	
	Date:Signature:	

APPLICATION FOR 2026-2027 EDUCATIONAL SCHOLARSHIP THE HATTERSCHEIDT FOUNDATION, INC. – FINANCIAL INFORMATION

Applicant's Name:			
Parents' Names:			
I/We have completed the App	lication for Federal Stude	ent Aid. Yes	
		No (STOP-mu	ast complete to be eligible)
Parents' 2024 Adjusted Gross (includes salary, wage		1040) siness profits and any other	taxable income)
\$0-25,000	\$50,000-75,000	\$100,000-125,000	\$150,000-175,000
\$25,000-50,000	\$75,000-100,000	\$125,000-150,000	\$175,000-& Above
Parents' Asset Information (Po Includes cash, savings, checki investment debt (not home), bu	ng, savings accounts, red	al estate and investments (no	ot home) less real estate or
\$0-50,000	\$100,000-150,000	\$250,000-300,000	\$500,000 & Above
\$50,000-75,000	\$150,000-200,000	\$300,000-400,000	
\$75,000-100,000	\$200,000-250,000	\$400,000-500,000	
Parents' 2024 Filing Status:	Married filing joint	return	
	Married filing sepa	rately	
	Qualifying widow	with dependent child	
	Head of Household	-	
	Did not file		
Applicant's immediate househ	old consists of (Check A	Il that Apply): Father	
	· ·	Mother Brothers Sisters Other (list)	(#) (#)
Number of family members at	tending college in 2026/2	2027	
Please list all scholarships and	amounts received to dat	e:	
Please note any other pertinen expenses of applicant:			
THIS INFORMATION WILL FOUNDATION, BUT IS NEO FINANCIAL NEED CRITER	CESSARY TO ASSURE		
(Signature of Parent)	(Date)	2	

2026-2027

LETTER OF RECOMMENDATION

TO

THE HATTERSCHEIDT FOUNDATION, INC.

(To be a thoughtful appraisal of the applicant, his/her strong and weak points, his/her character, personality, abilities, emotional stability, adaptability to new conditions, his/her seriousness of purpose, and his/her probability of success in further study.)

Name of Applicant:				
Address:				
Do you recommend college training	ng for applicant? Yes No			
If "YES", state your reasons:				
Length of time this applicant has been personally known by the undersigned:				
Relationship, if any, of the undersigned to this applicant (may not be a family member):				
		Date:		

2026-2027

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Signed:	Position or Title:	Date:		

Name of Applicant:

2026-2027

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