



BISMARCK STATE COLLEGE

# FOUNDATION

**This portion to be completed by applicant:**

Name of Applicant: \_\_\_\_\_  
Last First Middle Initial

- Type of Scholarship:
- Academic
  - Journalism
  - Visual Arts
  - Performing Arts (check type applying for)
    - Theater
    - Technical Theater
    - Band (specify instrument: \_\_\_\_\_)
    - Chorus (specify voice range: \_\_\_\_\_)

Note: Check only one type of application, as each type of scholarship requires a separate application and recommendation.

**This portion to be completed by individual making recommendation:**

Please describe in detail your knowledge of this student's responsibilities as well as their school involvement. Your knowledge of this student will assist the Scholarship Committee in considering his/her application. Please describe in detail why you recommend this student. You may attach a separate sheet but your signature is required at the bottom of this page.

\_\_\_\_\_  
Print Your Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title/Occupation

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
City, State, Zip Code

If the recommendation is being mailed separately from the application, please return to:

Bismarck State College Foundation  
PO Box 5587  
Bismarck ND 58506-5587  
(701)224-2486