**Bonnie Slough Student Scholarship**

The Bonnie Slough Scholarship Award was established by the family and friends of Bonnie Slough as a tribute to her life and commitment to education. Until her death in 2005, Bonnie was an employee of Billings Public Schools. The Scholarship Fund is held by the Education Foundation for Billings Public Schools.

The Scholarship is directed at a graduating senior from one of the Billings public high schools for use in further education. Interested applicants must be the children of current members of the Billings Classified Employees Association.

The scholarship award is $500. Funds are disbursed directly to the institution of higher learning after the Scholarship recipient has enrolled.

The Scholarship Selection Committee will use the following criteria to determine the scholarship winner:

- Demonstrated community service and spirit through involvement in school and/or community (including church) organizations
- Individual initiatives which exemplify character traits such as consideration for others, loyalty to community and country, respect for the beliefs and needs of others
- Academic achievement
- Participation and leadership in athletic, musical, dramatic or other extracurricular activities

**Applicant Requirements:**

- Be a graduating senior
- Be the child of a BCEA member
- Submit with the application a copy of your most recent high school transcript
- Submit two letters of recommendation from a school official, teacher, employer, and/or activity sponsor

The Bonnie Slough Scholarship Award will be presented at the annual awards assembly held at the recipient’s high school in the spring. For further information, please contact the Education Foundation for Billings Public Schools at 281-5149 or foundation@billingsschools.org.

Please submit applications to your guidance counselor by Wednesday, March 17, 2021.
NAME: ________________________________

ADDRESS: _____________________________________________________________

HOME PHONE: _______________ CELL PHONE: ______________

HIGH SCHOOL: ___________________________ DATE OF GRADUATION: _______

EMAIL ADDRESS: ______________________________________________________

DO YOU HAVE A PARENT WHO IS A BCEA MEMBER? ______

NAME OF PARENT WHO IS A BCEA MEMBER _____________________________

Please describe your anticipated course of study and career plans: (attach additional pages if necessary)

SCHOOL AND COMMUNITY ACTIVITIES: (Organizations, clubs, athletics)

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<thead>
<tr>
<th>Name of Organization/Club/Activity</th>
<th>Year of Participation</th>
<th>Awards/Leadership Roles</th>
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**EMPLOYMENT:**

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<th>Name of Business</th>
<th>Type of Work</th>
<th>Dates employed</th>
<th>Hours/Week</th>
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*Remember to attach a transcript and two letters of recommendation.*

I confirm that the above information is accurate and complete.

__________________________
Signature of Applicant