MARGARET DUNN SCHOLARSHIP APPLICATION
2025-2026

Purpose: The Margaret Dunn Scholarship has been established for graduating seniors in the Yakima School District who will be attending a **four-year college or university in the State of Washington.**

Important Information:

1. **DEADLINE** for submitting this application to your counselors is **Friday, March 7, 2025, at 2:45 p.m**. (No exceptions!)

2. Refer to the list of supporting documents needed (e.g., cover letter, this completed application and an official high school transcript). **Incomplete applications will not be considered.**

3. Type or print legibly. Illegible applications will be returned to you (you may type into this form).

4. **Announcement of Scholarship Recipients**: You will be notified by mail/email on or before **May 13, 2025,** regarding the status of your application.

5. If you have any questions about the application process, please call Ilda Parra at 509.573.7006 or Parra.ilda@ysd7.org.

Application Process: Applicant must submit the following items:

1. **Completed Application Form** (if handwritten, please print legibly in blue or black ink).

2. Personal **Letter of Application** written to the selection committee (like employment cover letter).

3. **Resumé** (1 page maximum).

4. One (1) or more **Letters of Recommendation** – (letters in sealed envelopes).

5. An **Official Transcript** - (transcript in sealed envelope).

Each part of the application should be completed correctly and neatly. It would be preferable if it were typed. Applicant should take special attention to eliminate grammatical, spelling, and other errors.

SPECIAL PROVISION: Scholarship funds will be issued directly to the recipient's campus. Funds will be disbursed in October. Recipients are required to send us proof of **full-time** enrollment in the form of an **Enrollment Verification** issued by the university. Proof of full-time enrollment must be received on or before **Friday**, **August 1, 2025.**

Please Note: Students are **ineligible** to receive a scholarship if they are:

1. Relatives of members of the selection committee.
2. Ancestors, spouses, children, grandchildren, or great grandchildren of the scholarship foundation trustee(s).

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PURPOSE: The Margaret Dunn Scholarship has been established for graduating seniors in the Yakima School District who will be attending a **four-year college or university in the State of Washington.** Please type or print your answers clearly. If application is illegible, it will be returned to you.

1.
Student ID _____ School Attending _____ GPA _____

2.
Last Name _____ First Name _____ M.I. _____ Date of Birth _____

3.
( ) _____ Contact phone #1 ( ) _____ Contact phone #2
Would you like to be notified via email? ☐Yes ☐ No
If **YES**, please provide your email address:

4.
Mailing Address
Address _____ PO Box _____ City _____ State WA Zip _____

5.
Father/Guardian Name _____ ( ) _____ Father/Guardian Phone
Language Spoken: ☐ English ☐ Spanish
Father/Guardian Employer _____
Mother/Guardian Name _____ ( ) _____ Mother/Guardian Phone
Language Spoken: ☐ English ☐ Spanish
Mother/Guardian Employee _____

6. Number of dependents supported by parent/guardian and the dependents' ages:

7. Are you presently employed: ☐Yes ☐No — If so, where:

8. Other employment experience:

9. What is your career plan?

10. Which schools do you plan to attend?
1st choice:
2nd choice:

11. Which college(s)/university(ies) are you already accepted to:

12. Which schools have you already applied to, but are not yet accepted:

13. List other financial assistance you expect to receive:

a.	Personal:	Amount: $
b.	Other Scholarship (s):	Amount: $
c.	Student Loan(s):	Amount: $
d.	Other Financial Resources (Grants)	Amount: $

~~14.~~
Does any family member receive ☐Free or ☐ Reduced priced school meals?
If so, please list name of school(s):
And most recent school year:

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15.	List your academic honors, awards and membership activities during high school:
16.	List your community service activities, hobbies, outside interests and extracurricular activities:
17.	What other information do you wish to share – that is relevant to the scholarship committee's decision process:
18.	• The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee. • Check **YES** or **NO** to be sure you have attached each item as required. • **Deadline** for this application to be received by your high school counselor is **Friday, March 7, 2025, at 2:45 p.m.**

☐ YES ☐NO	Completed, signed **Application Form** (this form)
☐ YES ☐NO	Your personal **Cover Letter**– stating your intent to apply (1 page maximum)
☐ YES ☐NO	Your **Resumé** (1 page maximum)
☐ YES ☐NO	One (1) or more **Reference Letters**–include these letters in sealed envelopes
☐ YES ☐NO	An **Official Transcript** (in sealed envelope)

19. I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.

I hereby understand that if chosen as a recipient of this continuing scholarship – I must provide evidence of **full-time** enrollment at a four-year college/university in the state of Washington on or before **August 1, 2025,** so that my scholarship funds can be awarded.

_____ _____

Signature of scholarship applicant **Date**

FOR COUNSELOR USE ONLY

APPLICANT'S FINANCIAL NEED IN RELATION TO THE SCHOOL HE/SHE PLANS TO ATTEND

GREAT: ☐ MODERATE: ☐ MINIMAL: ☐ NONE: ☐

APPLICANT'S GPA: _____ RANK IN CLASS: _____