



A Touchstone Energy® Cooperative 

East-Central Iowa Rural Electric Cooperative

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www.ecirec.coop

2025 SCHOLARSHIP APPLICATION

Please include a digital file or hard copy of a current photo of yourself to be used for print and web.

APPLICATION DEADLINE IS
MARCH 5, 2025

ID# _____
(Do not use)

Please return completed applications to:
East-Central Iowa Rural Electric Cooperative
ATTN: Scholarships
PO Box 248
Urbana, IA 52345
Email: scholarships@ecirec.coop

NOTE: Applicants must be **high school seniors, year ending 2025** and/or **accepted to, and attend the Powerline Technology Program at Northwest Iowa Community College.**

For your convenience, these forms can be completed and submitted electronically. Simply go to ecirec.coop and click on the “**Scholarship**” graphic located in the lower left of ECI REC’s home page.

Student Information

NAME: _____
(Last) (First) (Middle initial)

E-MAIL ADDRESS: _____ TELEPHONE #: _____

PERMANENT ADDRESS: _____
(Street, PO Box)

_____ (City, State, Zip Code)

How do you wish to be contacted? Phone Text Email U.S. Mail Other _____

How did you learn about the Scholarship program? _____ (counselor, poster, bill insert, newsletter, Facebook, parent, friend, newspaper, etc.)

NAME OF PARENT or Legal GUARDIAN (please print): _____

MAILING ADDRESS (if different from above): _____

NAME OF HIGH SCHOOL ATTENDING: _____

TELEPHONE # (if different from above): _____

CERTIFICATION AND SIGNATURES

All of the information submitted on this application is true and complete to the best of my/our knowledge. When asked by an authorized official of East-Central Iowa REC, we agree to give proof of the information that we have submitted. We also recognize that if verification is not submitted upon request, the applicant will not qualify or receive any scholarship(s).

APPLICANT AND ONE PARENT/Legal GUARDIAN SIGNATURE IS REQUIRED

If submitting by e-mail, please type legal name in place of signature below.

Applicant	Parent/Legal Guardian	Parent/Legal Guardian
Date	Date	Date

INSTRUCTIONS FOR COMPLETING APPLICATION

Page 1 Note that this is the only page in which your name and ID# will appear together. This page will be REMOVED before scoring your application. Applications will be separated by pages and scored individually. The selected scorers will not know whose application they are scoring.

Remember to attach a digital file (JPG, PDF, etc.) or a hard copy of a CURRENT PHOTO of yourself. Pictures of the winners will be published in ECI REC’s *Heartland Link* newsletter, newspapers, web and social media sites.

This page **MUST** be signed by YOU and your PARENT/LEGAL GUARDIAN who **MUST** be a current member of East-Central Iowa Rural Electric Cooperative.

Employees’ and directors’ children, grandchildren, and others living in their households are not eligible.

Page 3 Be sure you mark only A or B in Section I.

Pages 4-7 Be sure to list ALL activities since points are given for your involvement.

Page 8 Please be brief. One paragraph should be enough for you to be specific and let us know what you want to do after college.

Please submit ALL the pages of this application even if all sections are not filled in.

East-Central Iowa Rural Electric Cooperative will award 10 \$1,000 scholarships to members' children who want to continue their education.

It will also award up to 2 \$1,000 scholarships to children of members, or members who are accepted to, and attend the Powerline Technology Program at Northwest Iowa Community College at Sheldon.

COLLEGE DATA

College for which the scholarship will be requested: _____

Address: _____
(Street) (City) (State) (Zip Code)

Major field of study you plan to pursue: _____

SECTION I *(Check A or B below – DO NOT CHECK BOTH)*

- A. Four (4) Year College/University? _____
(Plan to complete 4 years of college or more)

- B. Community College/Trade School? _____
(Plan to complete 3 years or less of college)

SECTION II *(All applications **MUST** be signed by the school's guidance counselor.)*

Accumulative Grade Point: _____

Print Name of Guidance Counselor: _____

Signature of Guidance Counselor: _____ Date: _____

If submitting by email, please type legal name in place of signature below.

PERSONAL DATA / Work Experience

ID# _____ (Do not use)

Describe your work experience during the four years in high school (September 1 – May 31).

Work done each year:

Company	Position	Number of weeks worked	Average hours per week

Describe your work experience during the **summers** of your four years in high school (June 1 – August 31.)

Work done each year:

Company	Position	Number of weeks worked	Average hours per week

