

$1,000

FEDERATED YOUTH FOUNDATION SCHOLARSHIPS

2027

Eau Claire Energy Cooperative

Your Touchstone Energy® Cooperative

Your Trusted Energy Advisor

$1,000
FEDERATED YOUTH FOUNDATION SCHOLARSHIPS
OFFERED BY EAU CLAIRE ENERGY COOPERATIVE



APPLICATION DEADLINE January 8, 2027
A scholarship application form must be completed and returned to the high school, college, technical college or other post-secondary school student office (whichever applies) on or before the application deadline. **Do not submit the application to Eau Claire Energy Cooperative.***

SELECTION CRITERIA:

1. The student's parent or guardian must be a member of Eau Claire Energy Cooperative and currently receive ECEC energy service at their residence.
2. The scholarships should be awarded to qualifying students who would not otherwise receive scholarships from other sources.
3. The student must display average or above average academic records.
4. The student must display the potential to continue achievement in a post-secondary public or private college, university junior college or vocational school program.

SELECTION OF STUDENTS:
Each school's Scholarship Committee will select one first choice recommendation and an alternate recommendation, and include the following:

- Application form
- Photo of the student (if available at that time)
- Comments to support the nomination of that student

The Scholarship Committee must submit the above information no later than February 11, 2027 to:

Eau Claire Energy Cooperative
ATTN: Scholarship Coordinator
8214 Hwy 12
PO Box 368
Fall Creek, WI 54742

Federated Youth FOUNDATION

MONETARY DISBURSEMENT:
The student scholarship recipient will receive the funds after registering for one semester in the fall of 2027. The funds are requested from the Federated Youth Foundation after the student provides Eau Claire Energy Cooperative with a copy of their registration that shows course enrollment for that semester.

ALTERNATE SELECTION:
If the first choice recipient fails to comply with the selection criteria, or does not enroll in the fall 2027 semester, then the alternate student will be selected and must comply per above standards.

**Homeschool students, please contact the scholarship coordinator for instructions on how to submit your application.*

QUESTIONS:

Please contact Jeni Thorpe, Scholarship Coordinator at
Eau Claire Energy Cooperative at 715-836-6461 or jthorpe@ecec.com

STUDENT DATA:

1. Full Name: Last _____ First_____ Middle_____
2. Date of Birth _____ Telephone_____
3. Email: _____
4. Address: _____
   (Number and Street) *(City)* *(Zip)*
5. Family's Eau Claire Energy Cooperative Account Number: _____
   (obtain from your monthly energy bill)
6. Please complete the following information applicable to your situation:
   Parent Name_____ Occupation_____
   Parent Name_____ Occupation_____
   Guardian _____ Occupation_____
   Spouse, if applicable_____ Occupation_____
7. Number of children living at home under 18 years of age, or in college: _____

EDUCATION:

1. Name of high school or post-secondary school you presently attend _____
2. Graduation Date _____
3. Overall Grade Point Average_____
   (attach a copy of your high school or post-secondary school grade transcript)
4. Academic achievements, activities outside of the classroom, work, or other unique circumstances not reflected in your grades:

   _____

   _____

   _____

5. Education Plans: List the post-secondary school that you plan to attend and your course of study *(Major/Minor)*

   _____

   _____

   _____

   _____

6. Type of work or position you are presently interested in after graduation from post-secondary school

   _____

   _____

   _____

   _____

7. Please furnish any additional information you would like which you feel may help you attain this scholarship. Perhaps information about yourself and your family interests, hobbies, summer or after-school jobs, additional community or extracurricular activities, etc.

   _____

   _____

   _____

   _____

8.State in detail how you plan to finance your post-secondary education.

_____

_____

_____

_____

I authorize the committee members of the Scholarship Committee to review my scholastic records.
(If student is a minor, parent/guardian must sign.)

_____ _____

(Signature of Student) *(Signature of Parent/Guardian)*

Date _____

APPLICANT - DO NOT WRITE BELOW THIS LINE

SCHOLARSHIP COMMITTEE RECOMMENDATION

(Print Clearly)

STUDENT'S NAME_____

SCHOOL _____

COMMENTS_____

_____

_____

_____

_____

_____

_____

INDICATE SELECTION CHOICE: 1ST CHOICE_____ ALTERNATE_____

DOES YOUR SCHOOL HAVE AN AWARDS CEREMONY? YES____NO_____

IF SO, WHEN IS YOUR SCHOOL'S AWARD CEREMONY? DATE _____

TIME_____ LOCATION_____

WHO SHOULD EAU CLAIRE ENERGY COOPERATIVE CONTACT IF MORE INFORMATION IS NEEDED?

_____

TITLE_____TELEPHONE _____

SIGNATURE OF SCHOLARSHIP COMMITTEE MEMBER_____

(Please print name) _____

SCHOLARSHIP COMMITTEE EMAIL _____

Eau Claire Energy Cooperative

Your Touchstone Energy® Cooperative

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