TETON COUNTY

MONTANA



TETON COUNTY CLERK & RECORDER/ ELECTION ADMINISTRATOR

P.O. Box 610 · Choteau, MT 59422 · paula@3rivers.net

Office: (406) 466-2693 • Fax: (406) 466-3244 • TTY (406) 466-3976

Once again the Montana Association of Clerks and Recorders is providing a \$1,000 scholarship to one Montana student. The criteria for the scholarship are:

* graduating senior who will be attending a Montana university, college or vocational-technical school

One applicant from each county in Montana is selected in the initial judging and that application advances to the district level. Each of the districts then selects two candidates for consideration at the state level. The scholarships are awarded from among the candidates advancing through the county and district levels.

Enclosed is a SCHOLARSHIP APPLICATION FORMS to distribute to the Seniors in your high school. Please make copies as needed. The deadline for the completed application to be returned to the Teton County Clerk and Recorder is **MARCH 17, 2017**.

Please encourage your students to apply for this scholarship and return the completed application by the MARCH 17th deadline. The applications can be mailed to me at the following address:

Paula J. Jaconetty Teton County Clerk and Recorder P.O. Box 610 Choteau, MT 59422

or be delivered in person to the office of the Teton County Clerk and Recorder located in the Court House in Choteau.

If you have any questions, you may contact me at 406-466-2693.

Sincerely,

Paula J. Jaconetty

Clerk and Recorder

MONTANA CLERK & RECORDER'S SCHOLARSHIP APPLICATION FORM

AMOUNT OF SCHOLARSHIP

\$1,000.00 First Place Winner

APPLICANT MUST BE A GRADUATING SENIOR WHO WILL BE ATTENDING AN IN STATE SCHOOL.

This Application for the Clerk & Recorder's Scholarship becomes complete and valid only when you have returned the following materials:

Application	All required signatures
Current Transcript of Grades	Application deadline: March 17, 2017

Return completed application to:

Paula J. Jaconetty
Clerk & Recorder/Surveyor
Teton County Montana
PO Box 610
Choteau, MT 59422

Or deliver in person to the Clerk & Recorder's Office located on the 2nd floor of the Courthouse.

Updated 12/23/2016

			APPLICANT INFORMA	ATION		
				Cor	unty:	
-						
	(Last)	(First)	(Middle Initial)	Tel	ephone Number	
	Permanent Address	(street)	(city)	(sta	ite)	(zip)
	Father's Full Name				Occupation	
	Permanent mailing address of		(atreat)	(cit.d)	(atata)	(zin)
	guardian if different from app	olicant	(street)	(city)	(state)	(zip)
	Mother's Full Name				Occupation	
	Permanent mailing address of guardian if different from app		(street)	(city)	(state)	(zip)
	Total number of family school at least 1/2 time					
			SCHOOL INFORMAT	TION		
	High School Attended		G	aduation Da		
	Address				(Month)	(Year)
	Address	(street)	(city) (s	tate)	(zip)	Telephone Number
	Name of post secondary sch	and for which appli	icant's echolarship is reques	ed		
	Name of post-secondary sch	looi for which appli	cant's scholarship is reques	4 yr	College/Univ	Vo-Tech Other
	Address			Acc	redited? Yes	No
		(city)	(state) (z	ip)		
	Major field of study app	plicant plans to	pursue			
	Applicant's Signature					
	Date Completed					
	Date Completed	Mo.	Day Y	ear		
		STATEN	MENT BY PARENTS O	R GUARDIA	N:	
	I have read this applica candidate is applying for					
	Parent or Legal Guard	ian's Signature				
	Date Completed					
		Mo.	Day Y	ear		
		TRAN	ISCRIPT INFORMATION	NC		
owin	chool seniors must include ng section completed by th Rank: in a class of	a high school	transcript of grades an			
owin	ng section completed by the Rank: in a class of	a high school	transcript of grades an school official.			
owin	ng section completed by the Rank:	a high school	transcript of grades an			

PERSON		

Please list your work experience during the past 4 years. Indicate	dates of employment in
each job and the approximate number of hours worked each week, each job.	List total amount earned for

POSITION	Date From(mo/yr)	Date to (mo/yr)	Hours Per Week	This Position

EXTRA-CURRICULAR ACTIVITIES

ACTIVITY	No. of Years Partic.	Offices Held, Special Awards, Honors	ACTIVITY	No. of Years Partic.	Offices Held, Specia Awards, Honors

(If necessary, attach additional pages.)
Please describe how and when any unusual family or personal circumstances have affected your achievemer in school, work experience, or your participation in school and community activities. (Examples: Medical, dea in immediate family, divorce, tragedy, adverse financial circumstances, etc.) (If necessary, attach additional pages.)