## Renville-Sibley Cooperative Power Scholarship Program Application

(Available to High School Senior's only)

1.	Name of student	applying	•			
		(last)	(first)	(first)		
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3.	Student is a	•		Member Renville-Sibley Employee		
4. Member Account #				(from electric bill)		
5.	5. Primary contact number:					
6. Mother's Name:			Father's Name:			
7.	Name of high so	hool:			· · · · · · · · · · · · · · · · · · ·	
8.	Name and mailir	ng addres	ss of accredited s	chool you will attend in the	e fall of the year:	
Student's Signature (required)				Date		
Parent's Signature (required)				Date		

Return this application along with required documents by Thursday, February 22, 2024, to:

Renville-Sibley Cooperative Power Association Attn: Scholarship Committee PO Box 68 / 515 Hwy 212 W Danube, MN 56230

For more information, call us at (320) 826-2593 or toll-free 800-826-2593 (MN & SD).