

# Mike Lowe Memorial Lineman Scholarship Application

In Addition to the information below, the applicant must also provide a resume detailing experience, employment experience and duties, specialized skills, and references. The applicant must also provide a transcript of grades from any educational institution attended within the past three (3) years.

Application must be received by **FEBRAURY 2nd**

Required Information (Please Print)

Full Name:	Date of Birth:
Address:	
Parents= Names: (Applicant must be a current member or a dependent of a member of Big Horn Rural Electric.)	
Social Security Number:	Telephone Number:

- Are you a citizen of the United States? Yes No
- Are you a Wyoming resident? Yes No
- Do you have a valid driver's license? Yes No
- Are you at least 18 years of age? Yes No
- Have you received your high school diploma or G.E.D. certificate? Yes No
- Are you currently enrolled in high school, college, or technical school? Yes No  
If yes, give name of school: \_\_\_\_\_
- Have you ever been employed by an electric cooperative? Yes No  
If yes, give co-op name and dates of employment: \_\_\_\_\_
- Are you currently employed? Yes No  
If yes, may we contact your present employer? Yes No
- Are you willing to relocate to attend a training school? Yes No

**Applicant's Statement**

I agree to apply for any apprentice lineworker position that is open at a Wyoming electric cooperative upon completion of the lineworker program giving Big Horn Rural Electric first consideration. I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary for scholarship consideration. In the event I receive the scholarship, I understand that false or misleading information given in my application may result in forfeit of the scholarship. I understand, also, that I am required to abide by all scholarship regulations as outlined by the Big Horn Rural Electric Board of Directors.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date