

### **Everett Potter Memorial Scholarship**

These two \$500.00 scholarships will be awarded to Helena College students enrolled in the Diesel Technology Program.

#### **DEADLINE DUE: January 31st, 2025**

#### **Application Process:**

Student must submit:

- A typed essay explaining why you are applying for this scholarship, your career and educational goals and your plans after graduation,
- Three completed reference forms from non-family members in sealed envelopes, letters of recommendation can be included, but are optional,

□ Seek employment in an agriculture machinery or industrial machinery dealership

• A copy of unofficial transcripts.

Return to the family farm

After completion of	the Agri-Diesel '	Technology	Program, I	plan to:
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<ul><li>Other (please exp</li></ul>	lain)		
Source and amount of funds availa	ble for this acade	emic year:	
Parents \$ Own Income \$ Savings \$ Scholarships \$ Other Income (spouse, etc.) \$ Financial Aid			
Applicant Information: Applicant Name		GPA	
Mailing Address			
City	State	Zip	
Telephone Number			
Date of Birth	Marital St	atus	
Intended Graduation Date			
The scholarship committee/Helena or use the award information in pulname, program and dollar amount information may be disclosed.	olic relations docu	uments. The award inf	ormation may include your
Signature		Date	

Submit application materials to the Helena College Financial Aid Office, 1115 North Roberts Street, Helena, MT 59601 by 5pm on January 31st, 2025.



# Scholarship Reference Form 1 Everett Potter Memorial Scholarship

SECTION 1: To be Completed by the Applicant	
Name	
Under the Family Rights and Privacy Act of 1974, students enrolled a Montana have access to their educational records, including letter students may waive their right to see letters of recommendation, an confidence. I waive the right to review the reference form.	s of recommendation. However,
Student Signature	Date

#### **SECTION II: To Be Completed By Evaluator**

The above named individual is applying for a scholarship through Helena College University of Montana. Please rank the applicant in the categories below by placing an X in the appropriate box. Please return the form as soon as possible to the Financial Aid Office. If an applicant has not signed the waiver above, he or she may request to see the letters of recommendation after the scholarship decision has been made.

	Excellent	Good	Satisfactory	Below Average	Poor	Not Applicable
Ability to Learn						
Integrity						
Leadership Ability						
Perseverance Toward Goals						
Team Member						
Attitude						
Initiative						
Motivation						
Communication Skills						
Organization/Time Management						
Responsibility						
Self-Discipline						

Please use your personal knowledge of the applicant to respond to the following questions:

1. How long have you known the candidate, and in what capacity (employer, school instructor, etc.)

<ol> <li>Please tell us what you believe to be the applicant's particular strengths in his/her personal, educational or professional life. If you can, give examples of particular accomplishments.</li> </ol>
3. What is your knowledge of the applicant's educational goals and his/her progress toward achieving these goals?
4. Is there any additional information we should know about this applicant in regard to this scholarship award?
What is your overall recommendation?  I Recommend with Confidence □ Recommend □ Recommend with Reservations □ Do ot Recommend
may have concerns about this student. Please contact me.  I Yes
valuator's Name
Organization/Institution/Department
tle
ddress
hone Number Email
ignature of Evaluator Date



# Scholarship Reference Form 2 Everett Potter Memorial Scholarship

SECTION I: To Be Completed by the Applicant
Name
Under the Family Rights and Privacy Act of 1974, students enrolled at Helena College University of Montana have access to their educational records, including letters of recommendation. However, students may waive their right to see letters of recommendation, and therefore, the letters will be held in confidence. I waive the right to review the reference form.
Student Signature Date

### **SECTION II: To Be Completed By Evaluator**

The above named individual is applying for a scholarship through Helena College University of Montana. Please rank the applicant in the categories below by placing an X in the appropriate box. Please return the form as soon as possible to the Financial Aid Office. If an applicant has not signed the waiver above, he or she may request to see the letters of recommendation after the scholarship decision has been made.

	Excellent	Good	Satisfactory	Below Average	Poor	Not Applicable
Ability to Learn						
Integrity						
Leadership Ability						
Perseverance Toward						
Goals						
Team Member						
Attitude						
Initiative						
Motivation						
Communication Skills						
Organization/Time						
Management						
Responsibility						
Self-Discipline						

Please use your personal knowledge of the applicant to respond to the following questions:

1. How long have you known the candidate, and in what capacity (employer, school instructor, etc.)

<ol> <li>Please tell us what you believe to be the applicant's particular strengths in his/her personal, educational or professional life. If you can, give examples of particular accomplishments.</li> </ol>
3. What is your knowledge of the applicant's educational goals and his/her progress toward achieving these goals?
4. Is there any additional information we should know about this applicant in regard to this scholarship award?
What is your overall recommendation?  ☐ Recommend with Confidence ☐ Recommend ☐ Recommend with Reservations ☐ Do  Not Recommend
may have concerns about this student. Please contact me.  Yes  No Preferred contact method: Phone  Email
ivaluator's Name
Organization/Institution/Department
itle
Address
Phone Number Email
ignature of Evaluator Date



# Scholarship Reference Form 3 Everett Potter Memorial Scholarship

SECTION I: To be Completed by the Applicant	
Name	
Under the Family Rights and Privacy Act of 1974, students enrolled at Helen Montana have access to their educational records, including letters of rec students may waive their right to see letters of recommendation, and there confidence. I waive the right to review the reference form.	ommendation. However,
Student SignatureD	oate
-	

### **SECTION II: To Be Completed By Evaluator**

The above named individual is applying for a scholarship through Helena College University of Montana. Please rank the applicant in the categories below by placing an X in the appropriate box. Please return the form as soon as possible to the Financial Aid Office. If an applicant has not signed the waiver above, he or she may request to see the letters of recommendation after the scholarship decision has been made.

	Excellent	Good	Satisfactory	Below Average	Poor	Not Applicable
Ability to Learn						
Integrity						
Leadership Ability						
Perseverance Toward						
Goals						
Team Member						
Attitude						
Initiative						
Motivation						
Communication Skills						
Organization/Time						
Management						
Responsibility						
Self-Discipline						

Please use your personal knowledge of the applicant to respond to the following questions:

5. How long have you known the candidate, and in what capacity (employer, school instructor, etc.)

<ol> <li>Please tell us what you believe to be the applicant's particular strengths in his/her personal, educational or professional life. If you can, give examples of particular accomplishments.</li> </ol>
7. What is your knowledge of the applicant's educational goals and his/her progress toward achieving these goals?
8. Is there any additional information we should know about this applicant in regard to this scholarship award?
What is your overall recommendation?  ☐ Recommend with Confidence ☐ Recommend ☐ Recommend with Reservations ☐ Do  Not Recommend
may have concerns about this student. Please contact me.  Yes  Preferred contact method: Phone  Email
valuator's Name
Organization/Institution/Department
itle
Address
Phone Number Email
ignature of Evaluator Date