



T.I.P. Rural Electric Cooperative

Your Touchstone Energy® Cooperative



T.I.P. Rural Electric Cooperative
P.O. Box 534
Brooklyn, IA 52211
Phone: (800) 934-7976
Fax: (641) 522-9271

Dear Applicant:

We are happy that you are seeking one of our scholarships and urge you to return the required information as soon as possible. **The scholarship application deadline is April 15, 2022;** but I would encourage you to submit the data sooner. For any additional scholarship applications you may need, please go to our website www.tiprec.com.

The scholarship application package we require is as follows:

1. Complete this form - your name should be on all attachments.
2. Recent academic transcript from high school.
3. Compose a short essay outlining your high school honors, school activities, community involvement, employment history and how these experiences have shaped your character and future career goals.
4. Compose a short paragraph on why you feel electric cooperatives are important.
5. One letter of reference from a teacher, counselor or employer. (Limit to one page)
6. **Please attach a wallet size photo to application. Photo will be used for sole purpose of publication in cooperative's newsletter and social media if selected for scholarship. Photos will not be returned.**
7. Mail your complete application packet to:

T.I.P. Rural Electric Cooperative
Attn: Janet Faas
P. O. Box 534
Brooklyn, IA 52211

We wish you good luck in the scholarship competition and continued success in the years ahead.

Sincerely,

T.I.P. Rural Electric Cooperative

A handwritten signature in black ink that reads 'Janet Faas'.

Janet Faas
Staff Assistant/Communications



T.I.P. Rural Electric Cooperative
A Truist Energy Company

T.I.P. REC

2022 Scholarship Application

Scholarship applicants must be a U.S. citizen, a dependent of a current T.I.P. Rural Electric Cooperative member, a senior in high school for the 2021-2022 school year, and planning to enroll in an accredited two-year or four-year college, university or vocational/technical school. Please complete the form below; completeness and neatness ensure your application will be evaluated appropriately.

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Parents/Guardians Names: _____

Cooperative Name: _____ Account Number: _____

Please put the name and address of the high school which you will graduate this spring.

High School: _____

Address: _____

Please put the name and address of the accredited school you plan to attend in the fall.

School/College: _____ College Town/City: _____

Major Course of Study: _____

Signatures

Student Signature: _____ Date: _____

Parents/Guardians Signatures: _____ Date: _____

Scholarship Submittal Requirements:

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