

JOHN AND GRACE DICKSON SCHOLARSHIP

APPLICATION DEADLINE: MARCH 1

Last Name	First Name	Middle
SD Board of Regents ID Number	Date of Birth	
Mailing Address	City	
State	Zip Code	Telephone Number
High School	Graduation Date	
Intended Major		

High School Information

High School GPA _____ Class Rank _____ out of _____ Students

Standardized Tests: ACT Composite Score _____ SAT Score Total (if available) _____

Financial Information:

Have you completed the Free Application for Federal Student Aid (FAFSA) for this fall? Yes No

What is your Student Aid Index Number (SAI)? _____

Number in family _____ Number attending college in the fall _____

For all applicants:

Please attach a brief statement highlighting your scholastic and extracurricular accomplishments.

Please include one recommendation from a teacher, principal or community member with this application.

Submit all materials to the attention of:

**Dickson Scholarship Committee
Office of Scholarship Administration
414 East Clark Street
Vermillion, SD 57069
605-658-6262
Scholarships@usd.edu**