## JOHN AND GRACE DICKSON SCHOLARSHIP

## APPLICATION DEADLINE: MARCH 1/RENEWAL DEADLINE: JUNE 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 Schoo Information			
High School GPA	Class Rank	out of	Students
Standardized Tests: ACT Composite Score_		SAT Score Total (if available)	
Financial Information:			
Adjusted gross income from previous year _			
Number of family members			
Number of family members planning to atte	end college in next accadem	ic year	
<b>Note:</b> A completed FAFSA (Free Applicatio Have you completed the FAFSA? $\square$ Yes $\square$ N		nay be requested.	

## 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