



# Noranda

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*Scholarship Description:*

The Noranda Aluminum, Inc. Scholarship Fund was established to provide three \$1,500 non-renewable scholarships to be awarded each academic year to graduating high school seniors.

The first scholarship will be awarded to a graduating senior who is a dependent of a full-time employee of Noranda's New Madrid plant. The second scholarship will be awarded to a graduating senior from any high school in Mississippi, New Madrid, or Pemiscot County; and the third scholarship will be presented to a graduating senior from any high school in Scott, Stoddard, Dunklin, or Butler County.

Students receiving scholarships may attend any "regionally accredited higher education institution".

*Scholarship Criteria:*

Scholarship applicants must rank in the upper 25 percent of their graduating class and be "of sound character" and in good standing at the high school where they are enrolled. Financial need and service to their high school and community will also be considered.

*Application Deadline:*

Application and Recommendation Form must be returned by March 1<sup>st</sup>.

*Mailing Address:*

Mail application to

Student Financial Services  
Southeast Missouri State University  
One University Plaza  
Cape Girardeau, MO 63701

# Noranda Aluminum Scholarship Program

## I. Personal Information

I am applying for a scholarship for Academic Year: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Last First MI

Current Address: \_\_\_\_\_  
Street City State Zip

County : \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
daytime evening

Date of Birth: \_\_\_\_\_ Are you a U.S. Citizen? \_\_\_\_\_ Marital Status: \_\_\_\_\_  
mm/dd/yyyy

Father's Name: \_\_\_\_\_ Employed By: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Employed By: \_\_\_\_\_

## II. Educational Experience

Name of High School	Address	Years Attended
_____	_____	_____
_____	_____	_____

Date of HS Graduation: \_\_\_\_\_ Class Rank: \_\_\_\_\_ Class Size: \_\_\_\_\_

ACT or SAT Score: \_\_\_\_\_ Class Rank Certified By: \_\_\_\_\_  
Signature Title/School

## III. Honors, Awards, and Extracurricular Activities

List your most important honors, awards, and extracurricular activities and indicate any offices held.

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

## IV. Income Information and Personal Resources

Estimated Expenses	Estimated Resources (Parent and Applicant):
Tuition/fees _____	Savings _____
Textbooks _____	Contribution from income _____
Living Expenses _____	Gifts from Relatives/Friends _____
Other _____	Other _____
Identify: _____	Identify: _____
Total: _____	Total: _____

Will you be employed while attending college? Yes \_\_\_ No \_\_\_.

If yes, how many hours per week? \_\_\_\_\_.

How many family members, including yourself, are dependent on your parents' income? \_\_\_\_\_.

How many family members, including yourself, will be enrolled in college? \_\_\_\_\_.

## V. Certification

By signing this application, I certify that the information provided is correct. I also give Student Financial Services at Southeast Missouri State University permission to forward my completed application and the results of my Free Application for Federal Student Aid (FAFSA) to the scholarship committee for review.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

## VI. Biographical Sketch

Attach a brief biographical sketch. Include information such as why you are applying for this scholarship, your career goals, and any other pertinent information.

Scholarship Application Deadline is March 1<sup>st</sup>.

# Noranda Aluminum Scholarship Recommendation Form

Applicant: This form is to be given to a teacher, employer, supervisor of volunteers, or religious leader.

Please return this form with your scholarship application to: Student Financial Services, Southeast Missouri State University, Attention: Scholarship Coordinator.

Name of Applicant: \_\_\_\_\_  
Last
First
MI
SSN#

The above named student is applying for the Noranda Aluminum Scholarship through Southeast Missouri State University. Please help by checking the most appropriate column below based on your knowledge/observations of the applicant's abilities, academic performance, future goals, character, school/community leadership, contributions and potential as a future, contributing citizen.

	Outstanding	Above Average	Average	Below Average	Inadequate Opportunity to Observe
Ability to succeed in demanding academic courses					
Thoroughness in carrying out academic assignments/tasks					
Ability to communicate in writing					
Ability to communicate orally					
Qualities of critical thinking					
Curiosity about learning and new experiences					
Qualities of originality					
Thoroughness in carrying out responsibilities					
Willingness to work toward future goals					
Strength of enthusiasm					
Personal honesty/integrity					
Strength of character					
Ability to get along with adults					
Ability to get along with peers					
Demonstrated qualities of leadership					
Contributions to school or community					
Emotional Maturity					

Your further comments about this student would be of great benefit. Please use the back of this form for the purpose.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Position \_\_\_\_\_.

If teacher, please indicate subject area: \_\_\_\_\_.

If supervisor, please indicate setting: \_\_\_\_\_.

School/Business/Church \_\_\_\_\_ Phone Number: \_\_\_\_\_.

Scholarship Application Deadline is March 1<sup>st</sup>.