

Clark Kochivar Scholarship

Objective: The objective of the Clark Kochivar scholarship is to reward and encourage a student of Hobson High School to go to any accredited university or college.

Awards: One scholarship, valued at \$500.

Eligibility: The scholarship will be awarded to a Hobson High School student principally on the basis of the following:

- GPA
- Need
- Community Service
- Extra-curricular Activities
- Leadership Roles

Selection: The scholarship application will be reviewed by the Scholarship Award Committee. This committee consists of Shaun and Colleen Kochivar.

Rules:

- The scholarship must be used at an accredited college or university.
- The student must start the course of study at the university or college in the fall of the same year that the Scholarship is awarded.
- In cases where the student's studies or admission are delayed or interrupted for any reason, the Scholarship Award Committee must be notified immediately, and may result in forfeiture.

Required Documents:

- A current resume with work experience and any extra-curricular activities, noting any leadership positions.
- Two letters of recommendation or evaluation from Counselors, Teachers, Church Leaders, Coaches or Professors.
- A maximum two-page essay stating the purpose in going to college, accomplishments providing the greatest satisfaction, reason that he/she should be chosen as the recipient of this award. (Examples: Describe yourself. What are your Goals? What motivates you? Who are your role models and why? What is your definition of happiness and success? Whose lives have you made a difference in and how?)
- Copy of SAT or ACT scores.
- Copy of current high school or college transcripts with GPA.

Clark Kochivar Scholarship

This scholarship application must be completed and returned to Shaun Kochivar via email (shaun.kochivar@supervalu.com) or mail to Shaun Kochivar at:

1119 E Riversong Dr
Eagle, ID 83616

by April 15th of each year. Scholarships will be awarded by July 31st.

- Application Name: _____
- Home Telephone: (____) _____ - _____
- Home Address:
 - City _____ • State _____ • Zip: _____
- Email: _____
- DOB: ____/____/____
- College/University Name: _____
- Class year in Fall: _____
- Phone/Cell: (____) _____ - _____
- Academic Major/Minor: _____
- College Expenses for one year: (3 quarters/2 semesters)
 - Tuition and Fees \$ _____ per academic year
 - Housing \$ _____ per academic year
 - Meals \$ _____ per academic year
 - Books/Supplies \$ _____ per academic year
 - Other \$ _____ per academic year
 - TOTAL COSTS \$ _____ per academic year

Family Contribution % (Percentage % of family financial support available to reduce the total cost of one academic year)

- _____%

Questions about the scholarship and/or application process should be directed to: Shaun Kochivar at: shaun.kochivar@supervalu.com or 208.406.1040.