



## Doug Ericksen Community Legacy Fund Scholarship Application

Born and raised in Whatcom County, Senator Doug Ericksen represented Whatcom County's 42<sup>nd</sup> Legislative District for 23 years in both the Washington State House of Representatives and State Senate. Throughout his accomplished career in public service, Senator Ericksen remained focused on his core values of family, community, education, outdoor adventure, faith, and love of our country.

After Doug's untimely passing in 2021, this scholarship was created to honor his legacy and values. Each year a minimum of two scholarships of at least \$1000 will be awarded (one 4-year college; one 2-year program/technical school). Winners will be announced at their school awards nights, and funds will be distributed after recipients confirm completion of one grading period.

### **Basic eligibility requirements:**

1. Current high school senior enrolled in a Whatcom County high school or homeschool program planning to pursue a technical degree/ certificate or a 4-year education
2. Demonstrated involvement in activities that benefit our community
3. Well-rounded individual that shows commitment to activities, academics, and/or work
4. Submission of application packet, including evaluation forms

Please type or print all your answers neatly in ink.

**Completed applications must be postmarked by March 15 and mailed to:**

**Doug Ericksen Community Scholarship; PO Box 74, Ferndale, WA 98248.**

### **APPLICATION REQUIREMENTS AND INSTRUCTIONS:**

Please include ALL required items in a large envelope and mail by the March 15 deadline.

**1. Cover page** – create in your own format including:

- First & Last Name
- Permanent Mailing Address
- Non-School Email & Cell Phone Number
- Current high school and GPA
- Colleges or programs applied to and intended major/field of study
- College or program planning to attend
- Career Goals/ Future Plans
- Briefly explain your plan to pay for your continuing education. What other grants, scholarships, FAFSA/loans, family support have you received or expect to receive? Will you work in the summer or part-time during the school year?
- Certification: Sign and date the following statement: I certify that all information I have provided in my application is accurate and I completed it myself.

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

**2. TWO Confidential Reference Forms**

- One from a high school teacher, administrator, counselor, or staff member
- One from a community member who is not a relative (i.e. employer, youth leader, volunteer organization, other)

**3. Official, Sealed HS Transcript**

**4. Resume** – list activity and date/year plus short description (as needed) and approximate number of hours

- HS Clubs, Athletics, & Activities
- Leadership Roles
- Community/Volunteer Activities - school sponsored and non-school sponsored
- Work Experience
- Honors or Awards
- List of specialized coursework or special projects (CTE, AP/Honors, Fine Arts, etc.)
- Special circumstances (if applicable)

**5. Essay Responses:** On a separate sheet of paper, either write or type your answers to the following essay questions. Maximum 300 words each response

1. Write about one of your favorite experiences/adventures/places in Whatcom County.
2. If you had \$10,000 to donate, what Whatcom County cause or organization would you support with this money and why?
3. Choose one of the following and explain how it has impacted your life: family/unique circumstances, faith, love of our country.

**Questions?** Please email [dericksenlegacy@gmail.com](mailto:dericksenlegacy@gmail.com) or call (360) 220-1403.

[www.dougericksenlegacy.com](http://www.dougericksenlegacy.com)

## **Senator Doug Ericksen Community Legacy Scholarship School Personnel Evaluation**

**Evaluator Note:** Please complete the evaluation below. To ensure confidentiality, please place form in a sealed envelope with signature across the seal and give envelope directly to the scholarship applicant to turn in with their packet. **Envelopes without a signature across the seal will not be considered.**

**Name of Scholarship Applicant:** \_\_\_\_\_

Name/title of school personnel completing form: \_\_\_\_\_

Email and/or phone number of evaluator: \_\_\_\_\_

**Please rank the student in each section using a score of 1-5 with 5 being the top score:**

\_\_\_\_ Character & Citizenship

\_\_\_\_ Respectful & Courteous

\_\_\_\_ Positive Attitude

\_\_\_\_ Teachable & Coachable

\_\_\_\_ Leadership Qualities

\_\_\_\_ Commitment to Education & School Community

**Please add additional comments about how the student has demonstrated the core values in the classroom or in school-related activities:**

**Evaluator Signature** \_\_\_\_\_

Questions? Please email [dericksenlegacy@gmail.com](mailto:dericksenlegacy@gmail.com) or call (360) 220-1403.

[www.dougericksenlegacy.com](http://www.dougericksenlegacy.com)

## **Senator Doug Ericksen Community Legacy Scholarship**

### **Community Member Evaluation**

**Evaluator Note:** Please complete the evaluation below. To ensure confidentiality, please place form in a sealed envelope with signature across the seal and give envelope directly to the scholarship applicant to turn in with their packet. **Envelopes without a signature across the seal will not be considered.**

**Name of Scholarship Applicant:** \_\_\_\_\_

Name/title of community member completing form: \_\_\_\_\_

Email and/or phone number of evaluator: \_\_\_\_\_

How do you know the applicant? \_\_\_\_\_

**Please rank the student in each section using a score of 1-5 with 5 being the top score:**

Character & Citizenship

Respectful & Courteous

Positive Attitude

Teachable & Coachable

Leadership Qualities

Commitment to Community

**Please add additional comments about how the student has demonstrated the core values in community activities:**

**Evaluator Signature** \_\_\_\_\_

Questions? Please email [dericksenlegacy@gmail.com](mailto:dericksenlegacy@gmail.com) or call (360) 220-1403  
[www.dougericksenlegacy.com](http://www.dougericksenlegacy.com)