



# City of Black Hawk Scholarship Program

## APPLICATION

### Black Hawk Scholarship Program Guidelines:

1. Any student receiving their high school diploma from the Gilpin County RE-1 School District may apply for the City of Black Hawk Scholarship Program.
2. Students must apply for the City of Black Hawk Scholarship Program during their senior year of high school.
3. **Application for the City of Black Hawk Scholarship Program** must be received in the Black Hawk City Clerk's office by **March 15** of graduating year. Failure to provide completed application by the deadline shall result in denial of request.
4. Scholarship may be used at institutions of higher education, occupational schools, and trade schools. Graduate level studies are admissible.
5. Scholarships are awarded one (1) installment per semester for a total of eight (8) \$1100 awards within a six (6) year span from high school graduating year.
6. Once approved, the scholarship recipient must submit a **Scholarship Program Request** form for each semester, which shall include the following:
  - a. Recipient must be enrolled full-time in the program of study.
  - b. Recipient must include upcoming semester's class schedule for enrollment verification.
  - c. Recipient must maintain at least a 2.0 GPA to continue to receive scholarship funds.
  - d. Recipient must provide verification of GPA for previous semester in the form of a certified transcript or similar.
7. Scholarship forms can be found on the City's website at [www.cityofblackhawk.org](http://www.cityofblackhawk.org).
8. Scholarship will be paid directly to the institution where the recipient is attending.
9. Scholarship awards are subject to appropriation of funds.
10. Please direct questions to [CityClerk@cityofblackhawk.org](mailto:CityClerk@cityofblackhawk.org) or 303-582-2212.

Student's Full Name: \_\_\_\_\_

Graduating Class of: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: H: \_\_\_\_\_ C: \_\_\_\_\_

Email: \_\_\_\_\_

*I hereby authorize the faculty and staff of Gilpin County High School to release information to the City of Black Hawk.*

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

Please send completed application to:

**City of Black Hawk**  
ATTN: Scholarship Program  
PO Box 68  
Black Hawk, CO 80422