

MONTECAHTO CONTINUING EDUCATION GUIDELINES

This Grant is for an individual who is pursuing accreditation or certification from a program that provides training through a Vocational/Technical/Health or other specified program. This individual need not be a recent High School graduate, but must have a High School Diploma or equivalency documentation and be a resident of Lake County.

Up to \$1,000 in Scholarship money will be paid directly to the program upon notification that the applicant has been accepted. If the Scholarship is not used within 6 months of the date of the award, the Scholarship will be forfeited.

A fully completed application must be submitted by July 15th and the applicant will need to make themselves available for a personal interview,

Applications are available by contacting:

**Montecahto Scholarship Committee
P.O. Box 1002
Polson, Mt. 59860**

The Montecahto Club contact telephone number is 406-849-1339.

MONTECAHTO CONTINUING EDUCATION GRANT APPLICATION

NAME OF APPLICANT: _____

ADDRESS: _____

PHONE NUMBER: _____

CURRENT LEVEL OF EDUCATION (with documentation of GED and or equivalency).

EMPLOYER AND CONTACT INFORMATION (if applicable):

PROGRAM APPLIED FOR AND CONTACT INFORMATION:

Please attach a written explanation of:

1. What your goals are
2. What information and skills this program will provide for you
3. How you intend to use your certification from this program:

Attach two letters of recommendation and clarify their relationship to you (ex: employer, teacher).

In submitting this application, you acknowledge that you have read and agree to the conditions of the attached Continuing Education Guidelines.

SIGNATURE OF APPLICANT: _____

DATE OF APPLICATION: _____
