

**Twin Falls County
PROSECUTING ATTORNEY
DRUG FREE STUDENT
SCHOLARSHIP**



Grant P. Loebis
Twin Falls County
Prosecuting Attorney

- **1st Place: One year (two semesters) full-tuition scholarship for the upcoming academic year to the College of Southern Idaho.**

- **2nd & 3rd Place: One semester full-tuition scholarship to the College of Southern Idaho.**

ELEGIBILITY:

Students graduating in the upcoming spring from any high school in Twin Falls County are eligible to apply. The applicant must be a Twin Falls County resident at the time of application, must attend the College of Southern Idaho full-time for the upcoming academic year, and must be enrolled in either an academic or a vocational education program leading towards a degree or certification. Students related within the first degree to any employee of the Prosecuting Attorney's Office may not apply.

APPLICATION REQUIREMENTS:

1. A completed application form (attached).
2. An essay of not more than 1000 words, typed, double spaced, and 12 point font.
3. The topic of the essay will be, "What can be done to reduce the use and sale of illegal drugs in Twin Falls County?"
4. Certified official transcripts from your high school and any colleges you have received credit from.
5. Two sealed letters of recommendation from individuals not related to you, one of whom must be a teacher, counselor, or administrator of your high school.
6. On a separate sheet list and specifically describe, including dates, the following:
 - a. School and community involvement, including volunteer activities
 - b. Honors and awards
 - c. Leadership positions
7. A signed Drug and Alcohol Free Pledge (attached).
8. Selected finalists will be required to give a five-minute presentation to the scholarship committee at a time and date to be announced later, related to their background, their essay, and their reasons for remaining drug free.

Completed applications may be mailed or delivered to:

Grant Loebis
Twin Falls County Prosecuting Attorney
P.O. Box 126
425 Shoshone St. N.
Twin Falls ID 83303

Additional application forms may be found in your school counselor's office.

DEADLINE FOR APPLICATION: Post-marked or delivered by March 1

Twin Falls County
PROSECUTING ATTORNEY
DRUG FREE STUDENT
SCHOLARSHIP
APPLICATION



Grant P. Loebis
Twin Falls County
Prosecuting Attorney

You must complete and submit all requested information before the deadline or your application will be eliminated from consideration.

1. Please type or print clearly:

Full Name: _____ Birth Date: __ / __ / ____

Current Address: _____

City: _____ County: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

High School: _____ Cumulative GPA: _____

2. To complete your scholarship application, include this form, along with:

- a. An essay not more than 1000 words, typed, double spaced, and 12 point font, on the topic.
- b. The essay topic is: "What can be done to reduce the use and sale of illegal drugs in Twin Falls County?"
- c. Certified official transcripts from your high school and any colleges you have received credit from.
- d. Two sealed letters of recommendation from individuals not related to you, one of whom must be a teacher, counselor, or administrator of your high school.
- e. On a separate sheet list and specifically describe, including dates, the following:
 - a. School and community involvement, including volunteer activities
 - b. Honors and awards
 - c. Leadership positions
- f. A signed Drug and Alcohol Free Pledge (attached).
- g. Note: Selected finalists will be required to give a five-minute presentation to the scholarship committee related to their background, their essay, and their reasons for remaining drug free.

The packet must be postmarked and/or hand delivered by March 1 to Grant Loebis, Twin Falls County Prosecuting Attorney, P.O. Box 126, 425 Shoshone St. N., Twin Falls, Idaho 83303.

The required materials must be submitted as a single packet. If your school's policy is to mail the transcripts separately, such transcripts must be postmarked by March 1. Faxed or e-mailed applications will not be accepted. If the packet is incomplete by this deadline, you will be eliminated from consideration.

By submitting an application, the applicant agrees to follow the Drug and Alcohol Free Pledge. Failure to follow the Pledge will void the scholarship.

Student's Signature: _____ Date of Application: _____

Twin Falls County
Prosecuting Attorney
Drug Free Student Scholarship Pledge

I pledge to pursue my education without drugs. To this end:

I pledge to live a drug free life;
I pledge never to use illegal drugs and not to use alcohol while under age;
I pledge to encourage my peers to lead a drug and alcohol free life; and
I pledge to promote a drug and alcohol free lifestyle in my community.

Signature_____

Date_____