

Devils Tower Natural History Association—Chris Campbell Memorial
2026 Scholarship Application
P.O Box 37, Devils Tower, WY 82714

First established in 1958, Devils Tower Natural History Association is a non-profit corporation chartered by the United States Congress, to aid the National Park Service with historical, educational and interpretive programs. Our mission is to promote understanding and conservation of the natural, cultural and historical resources of the nation's first national monument through education, public information and service.

This is a monetary, one-year scholarship in the amount of \$2,500.00.

Qualifications:

- A.** The applicant must be enrolled as a full-time student in one of Crook County's four high schools, to graduate in May with a GPA of at least 2.5.
- B.** Prior to awarding the monies, the applicants must provide proof of acceptance from an accredited vocational/technical school, two-year college, or four-year college so that scholarship monies can be sent directly to the financial aid department of the verified institution.
- C.** Letter of reference from a teacher, counselor, or employer must accompany application.
- D.** Applicants will submit a 400-word essay addressing one of the topics listed below. Or, an applicant can submit an essay on a topic that directly relates to the tower. Please keep to the word limit as closely as possible, and please proofread before submitting. Attach your essay to this completed form and return to DTNHA, P.O. Box 37, Devils Tower, WY 82714, postmarked no later than April 15, 2026, or to school counselor by same date.

Essay Questions (choose ONE):

1. What does conservation mean to you?
2. In recent years, politicians have been wanting to privatize public lands through various legislative measures. How are your rights as a citizen represented in these conflicts of public lands?
3. The communities in Crook County are lucky to have a National Park Service unit in our backyard. What would be some of the benefits of having a site so close by?

Name: _____ Vocational School or College, and Address: _____

Address: _____

Phone: _____ Signature of Applicant, verifying work is their own: _____

Birth Date: _____ Name and Date: _____

Parent or Guardian: _____ If any questions, please call 307-467-5283 ex 631

Counselor Signature (please verify GPA): _____