



St. Croix Valley Employers Association Future Leaders in Human Resources Scholarship

About SCVEA and Scholarship Guidelines

The St. Croix Valley Employers Association (SCVEA) is seeking scholarship applications for the 2025-2026 school year for individuals seeking a degree or certificate in Human Resources or a business-related field. Please review SCVEA's mission, vision, and scholarship criteria.

SCVEA Mission

Inspiring and engaging the St. Croix Valley employer community through human capital development and strategic partnerships.

SCVEA Vision

Building a better employer community in the St. Croix Valley.

The St. Croix Valley Employers Association (SCVEA) was formed in 1979 by a small group of business leaders. The first meeting was held in February 1980 and was attended by 42 representatives from 28 firms. SCVEA is a Society for Human Resource Management (SHRM) affiliate.

The origin of the SCVEA grew out of a perceived need to develop a collection vehicle for salary information, data that would help inform local employers concerning prevailing wage rates for a variety of job classifications. That remains a key focus for many Members. For others, the networking opportunities and/or the training on human resource-related issues are of greater appeal. Regardless, our members share the common philosophy that the existence of the association provides a tangible benefit to the HR side of businesses in the St. Croix Valley.

Application Due Date: March 31, 2025

Scholarship Amount: \$1,000

Payment: Scholarship payment will be made directly to the school you attend after the completion of a successful semester, maintaining a minimum GPA of 2.0 on a 4.0 scale.

Eligibility

High School Students:

- Current high school student eligible for graduation in 2025
- Seeking a degree in Human Resources or a related business field
- Attending or planning to attend a university or technical college
- Residing in Pierce, St. Croix, Polk, Burnett, or Barron counties at the time of application

Continuing Education Students:

- Individuals interested in continuing education with an emphasis on Human Resources
- Attending or planning to attend a university or technical college
- Residing in Pierce, St. Croix, Polk, Burnett, or Barron counties at the time of application

Please submit the completed application to scholarships@scvea.com



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SCVEA Scholarship Application

Personal Information

Full Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____

Email Address: _____

Educational Information

Current Status:

High School Senior (What is the name of current High School) _____

Current College Student

Returning Student

New Student

College Attending/Plan to Attend: _____

School Address: _____

Major Seeking: _____

Degree or Course of Study (check one):

Technical certificate/diploma

Associate's degree

Bachelor's degree

Personal Statement:

Please submit a personal statement between 500 and 1,000 words that addresses the following:

- What is your interest in human resource management or a related business field, and what are your career goals?
- How will obtaining a degree help you achieve your career objectives?
- Why do you believe you are a strong candidate for this scholarship?



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Personal Statement continued



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Personal Statement continued

How did you find out about this scholarship?

Statement of Student Authorization

I have reviewed and understand the scholarship guidelines and am aware that failure to follow them may result in the disqualification of my application. To the best of my knowledge, I certify that all the information provided is accurate and truthful. I acknowledge that the St. Croix Valley Employers Association reserves the right to modify or cancel any scholarship at any time, and I understand that receiving this award may affect my financial aid. I understand that scholarship awards are based on merit and contingent upon maintaining satisfactory academic progress, with a minimum cumulative GPA of 2.0 on a 4.0 scale. Falling below this requirement will result in ineligibility to receive the scholarship. I hereby authorize the release of all information contained in my scholarship application and transcripts to the SCVEA scholarship committee. If awarded a scholarship, I give my consent for SCVEA to use my name, photograph, and award details for promotional purposes.

Signature of Applicant: _____

Date: _____