

THE SCHOLARSHIP FUND

Sponsored by:

North Carolina Fire Marshal's Association
322 Chapanoke Road, Suite 200
Raleigh, North Carolina 27603

APPLICATION OF

(Name)

APPLICATION DEADLINE: MAY 1ST

Action of the Awards Committee

APPLICATION
 APPROVED DENIED

AMOUNT AUTHORIZED: \$_____

This grant is awarded for fiscal year _____

BY: _____ DATE: _____

NOTICE TO APPLICANT: Please read thoroughly the "Instructions To Applicant" and the "Criteria of Qualifications" sections of this application.

Date: _____

Name in full: _____
(FIRST) (MIDDLE OR MAIDEN) (LAST)

Home address: _____
NUMBER, STREET OR R.F.D.

(CITY) (STATE) (ZIP)

Date Of Birth: _____ Age: _____

Name of Father (or male guardian): _____

Home Address: _____
(City) (State) (Zip)

Name of the fire department, county, city or state where employed

Title of position or job: _____ For how long: _____

Name of Mother (or female guardian): _____

Home Address: _____
(City) (State) (Zip)

Name of the fire department, county, city or state where employed

Title of position or job: _____

Length of time in position: _____

I hereby apply for a grant to enable me to (obtain)/(continue) my education at

_____ located at _____
(COLLEGE, UNIVERSITY, TRADE SCHOOL, ETC.)

for session beginning _____, 20____ and ending _____, 20_____.

My classification will be Freshman, Sophomore, Junior, Senior

My intended vocation is _____.

The course of study I plan to major in is _____.

Name of High School, Preparatory School, College, etc., you have attended or are now enrolled in is:

SCHOOL	LOCATION	DATES	
		FROM	TO

I. Parent's or Guardian's Annual Income and Expenses

Estimated

Income	YEAR	Total 20____	Total 20____	Total 20____
A. Wages, salaries, tips and other compensation				
Father or male guardian		_____	_____	_____
Mother or female guardian		_____	_____	_____
B. Dividend		_____	_____	_____
C. Interest		_____	_____	_____
D. Other (Social Security, Benefits, Veterans benefits, Welfare, etc.)		_____	_____	_____
Total (Add A, B, C, D)		_____	_____	_____

Expenses

A. Medical and Dental not covered by insurance	_____
B. Casualty or Theft Losses	_____
C. IRS itemized deductions	_____
D. US Income Tax Paid	_____
E. Other Unusual Expenses	_____
Total (Add A, B, C, D and E)	_____

If the applicant is not dependent on parents or guardians for financial support (married or independent) then the applicant should provide the same information for him/herself.

II. Parent's or Guardian's Assets and Liabilities

A. Home if owned or being purchased			
Year Purchased _____	Purchase Price \$ _____		
Total	Estimate of present	Unpaid Mortgage	
Fire Insurance	Market Value	Principal or Debts	
\$ _____	\$ _____	\$ _____	
B. Market value of other real estate owned		\$ _____	
C. Investments (stocks, bonds, and other securities)		\$ _____	
D. Cash, savings and checking accounts		\$ _____	
E. List all outstanding debts:			_____

III. Student Applicant's Assets and Benefits

A. Assets	
1. Savings	\$ _____
2. Other (endowments, trusts, inheritances, investments, etc.)	\$ _____
B. Other Educational Benefits	
1. Social Security Benefits per month	\$ _____
2. Veteran Benefits per month	\$ _____
3. Other Grants or Scholarships	\$ _____

IV. Student Applicants Estimated Educational Expenses

- A. Tuition per month \$ _____
- B. Book and supplies and fees per month \$ _____
- C. Room and board per month \$ _____

I solemnly affirm to the correctness of the information in this financial statement.

Student Applicant's Signature: _____

Date _____

Parent/Guardian's Signature: _____

Date _____

INSTRUCTIONS TO APPLICANT

1. This application has been prepared as a frank and friendly means of obtaining necessary information regarding the applicant, and the applicant is required to give all information requested. Read the contents carefully and understand each question and all information requested.
2. Before filling in the application, draft your answers on an extra application form as your file copy and work sheet. Little consideration will be given to carelessly prepared applications.
3. Every question and statement must be answered and submitted. Do not answer any question with a check mark. If answer is "none" or "does not apply", it should be so stated. If spaces are inadequate for some answers, use separate sheets.
4. Answers must be neatly TYPED OR PRINTED by applicant in blue or black ink.
5. Place name in proper space on front page of application.
6. Include a complete financial statement of parents or guardians as requested with this application. Also indicate, by title and amount, any other financial assistance that you will be receiving.
7. Have mailed directly to the NC Fire Marshal's Association, three (3) letters of recommendation, two (2) of which must be from teachers or faculty members.
8. Have mailed directly to the NC Fire Marshal's Association, an up-to-date copy of your high school or college transcript.
9. Return to the NC Fire Marshal's Association, the completed application with all required information.
10. Have your ACT or SAT score sent directly to the NC Fire Marshal's Association, Inc., 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603

"CRITERIA FOR QUALIFICATION" OF STUDENT APPLICANTS

The Educational Fund Committee may establish reasonable and operable procedures and qualifications for determining the selection of the student or students considered as recipients of grants from the Educational Fund, as follows:

1. The student applicant shall be sons or daughters of living or deceased fire inspector certificate holders and, who worked or are working for a fire department of the City or County or State government, and further, that such City or County or State agency or department shall be an active member of the NC Fire Marshal's Association.
2. The student applicant shall agree that the use of grant funds shall be predicated on his or her enrollment or continuance of education in a recognized and/or accredited school such as a college, university, trade school, business college, or as may be acceptable to the Educational Fund Committee.
3. The applicant's need for financial assistance.
4. The applicant to possess qualities of good character and integrity.

5. A record of evidence of satisfaction scholastic or school grades, ability, ambition and desire for continuance of education.
6. The grant may be utilized by a student for continuation to succeeding year or years upon satisfactory academic progress, subject to review by the Committee. The maximum number of years that funds may be granted a student is four years. All students desiring continuation of funding must make application each year using this form.

I solemnly affirm to the correctness of the information supplied in this application, and that I have thoroughly read and understand the "Instructions To Applicant" and the "Criteria for Qualification" as transmitted herewith. If grant is provided, I agree and promise to use it for no other purpose than as set forth in the "Criteria for Qualification".

Applicant's Signature: _____

Date: _____