

# MICHIGAN YOUTH APPRECIATION FOUNDATION METRO DETROIT YOUTH DAY

## **2025 SCHOLARSHIP AWARD PROCESS**

*Purpose: To recognize students in the Detroit Metropolitan area who have maintained good standing academically and who have overcome personal challenges to graduate from high school and go on to an institution of higher learning.*

### **Student Selection Criteria**

- High school students who will be graduating from a public, parochial, private or charter high school in Wayne, Oakland and Macomb counties.
- Students who have been accepted into a four year university or college or a two year community college program and have provided a letter of acceptance for enrollment.
- Students who have a grade point average (GPA) of 2.0 or higher.
- Students who live in the greater Metropolitan Detroit area and surrounding communities.
- Students who have been recommended by their school counselor, principal, teacher, minister or community leader.

### **Application Process**

(Please use check boxes provided to make sure you have submitted all the required documentation).

**Applicants must submit the following documents with the application:**

- ☐ **Completed Scholarship Application.** Print legibly or type all applications
- ☐ **Official Letter of Acceptance** from the college or university applicant will be attending
- ☐ **Official High School Transcript.** Copies are acceptable, but must be legible.
- ☐ **Letter of Recommendation** (up to 5) from individual(s) other than family or relatives.
- ☐ **One Page Essay** for additional information about yourself that you would like the selection committee to review while considering your application. This may include your life goals, extra-curricular activities and special circumstances that affected your life or challenges you had to overcome.

**APPLICATIONS RECEIVED WITHOUT REQUIRED DOCUMENTS WILL NOT BE CONSIDERED !**

### **Notification Process**

Students who have been selected will be notified by regular mail. It is very important to include **accurate** contact information. **If we are not able to verify applicant information, it may forfeit the scholarship award. Scholarship awards amounts vary based on sponsorship.**

Detailed information regarding the Metro Detroit Youth Day Awards Ceremony will be included in the letter. **If your plans change and you do not plan to attend school or change the college or university you plan to attend, you must contact us immediately. Please note that scholarships are not transferable to another school.**

**Completed Applications and All Documentation Must Be Postmarked:**

**DEADLINE: FRIDAY, MAY 30, 2025**

Please send to:

Metro Detroit Youth Day Scholarship Committee  
c/o Edward Deeb, Founder and Chairman  
26333 Jefferson Ave., Ste 101, St. Clair Shores, MI 48081  
Contact Information: Phone: (586) 774-4000  
Email: edeeb@miyouthfdn.org

Metro Detroit Youth Day Scholarships are sponsored by:

Participating Businesses & Foundations and Michigan Youth Appreciation Foundation

KEEP THIS FOR YOUR INFORMATION

# MICHIGAN YOUTH APPRECIATION FOUNDATION METRO DETROIT YOUTH DAY 2025 SCHOLARSHIP AWARD APPLICATION

**Please Type or neatly Print —Must Be Filled Out Completely**

Please use check box provided to make sure you have submitted all the required documentation.

Student's Name \_\_\_\_\_  
First Middle Initial Last  
Address \_\_\_\_\_  
Number Street Michigan Zip  
City \_\_\_\_\_  
Phone Number(\_\_\_\_\_) Alternate Phone Number(\_\_\_\_\_) \_\_\_\_\_  
Date of Birth \_\_\_\_\_ ☐ M ☐ F E-Mail address \_\_\_\_\_  
High School \_\_\_\_\_ GPA \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
School Counselor \_\_\_\_\_ High School Phone Number (\_\_\_\_\_) \_\_\_\_\_  
College or University Student Plans to attend: \_\_\_\_\_  
**(Student Must be Accepted and Attending for Fall Enrollment. Please Submit Letter of Acceptance)**  
Location of College/University: City \_\_\_\_\_ State \_\_\_\_\_  
Intended Major \_\_\_\_\_ Career Objective \_\_\_\_\_

Have you received any other scholarships? ☐ Yes ☐ No If Yes, Please list other scholarships:

Name of Scholarship	Amount/ year	Name of Scholarship	Amount/ year

I confirm that I am not receiving any scholarships to date: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature

Recommended by \_\_\_\_\_ Phone Number(\_\_\_\_\_) \_\_\_\_\_  
(Name of person or organization)

Additional Contact Phone (\_\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

**Please Complete and Return Application and All Required Documentation to:**

**Metro Detroit Youth Day Scholarship Committee**

26333 Jefferson Ave, Ste 101 \* St. Clair Shores, MI 48081

Phone: (586) 774-4000 \* Email: [youthday@miyouthfdn.org](mailto:youthday@miyouthfdn.org)

**Deadline for Application: FRIDAY, MAY 30, 2025**

## **Required Documentation\***

- ☐ **Completed Scholarship Application**
- ☐ **Letter of Acceptance from attending College or University**
- ☐ **Official High School Transcript (Copies are acceptable)**
- ☐ **Letter of Recommendation (1 to 5)**
- ☐ **One Page Essay-Include information about yourself and life goals.**

**\*APPLICATIONS WILL NOT BE PROCESSED IF DOCUMENTATION IS MISSING.**