

BLUE WOLVERINE FOUNDATION

SCHOLARSHIP

Scholarship Application

**Scholarship Amount Awarded: Up to \$500 per awarded recipient (s).
Scholarship is awarded one-time per recipient**

Qualifications to submit application:

Applicant must have been diagnosed with Type-1 Diabetes prior to applying.

Applicant primary residence must be within the following Missouri counties: Marion, Lewis, Monroe, Clark, Knox, Adair, Pike, Ralls, Scotland and Shelby.

Applicant must be graduating the year of application with a high school diploma or G.E.D (First Responder Exemption)

Applicant must be enrolling in one of the following:

- College/University (traditional or on-line)
- Community/Junior College (traditional or on-line)
- Technical College
- Trade School
- Police, Fire, EMS Academy/Class (applicants for Police, Fire and EMS will have to apply for the scholarship on, or before, their 21st Birthday).

In addition to the application, the applicant will need to submit an essay (min. 250 words/ max. 500) about what they plan on doing in their educational journey for not just better themselves, but the community around them.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email _____

Are you a Type-1 Diabetic? YES NO

Do you meet the criteria for this scholarship (shown above)? YES NO High School Attended? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

Please list three professional/Personal references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to me being a Blue Wolverine Foundation Scholarship recipient, I understand that false or misleading information in my application or interview may result in my release as a recipient.

Signature: _____ Date: _____