



Midwest Retailers &
Manufacturers Association

SCHOLARSHIP APPLICATION
2016 - 2017 Academic Year

Please complete the following application and return to:
M.R.M.A. 44 Wooded Lane Lake Forest, Illinois 60045

STUDENT NAME: _____
(Last) (First) (Middle Initial)

ADDRESS: _____
(Street) (City/State/Zip)

HOME TELEPHONE # (_____) _____ EMAIL ADDRESS (please print): _____

CURRENT SCHOOL: _____ CITY: _____

SCHOOL CLASS RANK (if available): _____ out of _____

SCHOOL GPA: _____ out of _____

PLANNING TO ATTEND: _____ SCHOOL: _____

MAJOR AREA OF STUDY: _____

Please submit a written paragraph description on each of the following:

1. Need for financial assistance
2. Reasons for deserving the scholarship
3. Reasons for applying to the school you chose & area of studies
4. Outside interests, extracurricular activities
5. Career goals
6. Share your understanding of MRMA and our industry.

The winners are selected on the basis of addressing the above written answers.

PLEASE SUBMIT YOUR HIGH SCHOOL and/or COLLEGE TRANSCRIPT WITH THE COMPLETED APPLICATION (incomplete applications will not be accepted).

I recommend for consideration the above applicant.

Signature of Member _____ Date _____

Member Name (print): _____ Phone: _____

Member email: _____

DEADLINE FOR SUBMISSION IS: January 31, 2016