



# Thompson M-TEC Scholarship Application

Please complete this application and return it to  
Thompson M-TEC, 6364 136th Avenue, Holland, MI 49424  
Or fax it to: 616-738-8936

### Scholarship Information and Background:

As the need for skilled training in our community increases, so does our belief that the pursuit of a higher education for Ottawa County residents should not be hindered by one's ability to afford that training. Thompson M-TEC and the Ottawa Area Intermediate School District would like to partner in helping you, who may have a financial need, with an opportunity to gain skilled training in any of our career course(s). This scholarship will allow you to apply for a course(s) that may give you specific skills to help further your education.

### Note:

- *If you live in the TriCities area of Grand Haven, Spring Lake, Ferrysburg, or you are a stationed member of the Coast Guard in Grand Haven, please apply first to the Race Scholarship for vocational education.*
- *Some courses may require basic skills to qualify.*

### Applicant's Responsibility for Scholarship Consideration:

- Applicants must be at least 18 years of age.
- Thompson M-TEC/OAISD will fund up to 50% of the tuition toward any course(s). Tuition for online courses cannot be applied toward the scholarship.
- Applicants will be responsible for the remaining balance toward the tuition *plus required* cost of any textbook or any additional training material or certification associated with the selected course(s).
- Applicants will need to resubmit an application for each course requested.
- Applicants must provide a one-page letter indicating their need for assistance for this scholarship such as financial needs, military service, accomplishments, and goals.
- Applicants must complete the financial information on the final page of this application.
- Applicants will be chosen based on the completed application, which is reviewed by the scholarship committee upon receipt of the application.
- Scholarships will be awarded at the discretion of the scholarship committee based on the amount of applicants, course start dates, and open seats in the class.
- The scholarship is not valid if an employer offers tuition reimbursement or if student is receiving funds from West MI Works! or another source.
- An incomplete scholarship application will not be considered for processing.

**Please list your 1<sup>st</sup> and 2<sup>nd</sup> choice for courses which interest you (excluding online):**

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Please review the guidelines and eligibility requirements before completing this application.

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Email \_\_\_\_\_ Birthdate \_\_\_\_\_

Are you a US citizen? (circle) Y or N

Preference is given to returning active duty veterans based on financial needs. Are you a veteran returning from active duty? (circle) Y or N

If so, when and where did you serve during your active duty?

(Please provide proof of active duty status)

\_\_\_\_\_

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**For Office use ONLY:**

Yes

No

*Signature 1:*

*Signature 2:*

*Signature 3:*

*Signature 4:*



Verification Information for financial need consideration. In the table below, please complete all applicable financial sources for consideration.

Names and Ages of Household Members	Circle one	Gross Earnings from Work	Circle one
1.	<u>Working?</u> Yes / No		Month Week
2.	<u>Working?</u> Yes / No		Month Week
3.	<u>Working?</u> Yes / No		Month Week
4.	<u>Working?</u> Yes / No		Month Week
5.	<u>Working?</u> Yes / No		Month Week
6.	<u>Working?</u> Yes / No		Month Week
7.	<u>Working?</u> Yes / No		Month Week
8.	<u>Working?</u> Yes / No		Month Week

I certify that all information on this application is true, and I understand that the school may grant a scholarship that will fund up to 50% of the tuition toward any course(s) based on the information given upon verification by school officials. I understand that if I purposely falsify this information, this scholarship will become invalid.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Thompson M-TEC Representative

\_\_\_\_\_  
Date