

Application Instructions

1. Submit a complete MCF Scholarship Application. (Answer each question to the best of your ability).
2. Submit an two essays (Maximum 1 page per essay question):
 - a. Personal Statement: tell us about yourself, your goals after completing college/vocational school; and why these goals are important to you?
 - b. Answer one of the two essay questions below:
 - i. How has the COVID-19 impact you, your family and/or your community? What have you learned from this challenging time (if any)?
 - ii. What does it mean to you that anyone's zip code and race can be used to predict life outcomes? What would you change (if anything)?
3. Attach a resume of employment history, school, community, and service activities.
4. Optional: Enclose a letter of recommendation from a teacher, counselor, employer, or community member.

Applicant Information

Student Name: _____ Date of Birth: _____ Gender: M F GNC

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Mobile: _____ Email: _____

Academic Information

High School Attended: _____ Graduation Date: _____

College(s) Attended: _____ Date Attended: _____

Student Type

Program of Study/Major: _____

Vocational/2 Yr. College Undergraduate Graduate

New Student Continuing Student Transfer Student

Family Household Information

Marital Status: Single Married Divorced Widowed

Are you a single parent? Yes No

Are you or were you in state custody or foster care? Yes No

Will you be living with your parent(s) and/or legal guardian in 2020/2021: Yes No

If yes, please list all the individuals in your family household (excluding yourself):

Relationship	Age	Grade

Employment Information

Will you be supporting yourself and/or your family in 2020/2021? Yes No

Are you employed? Yes No If yes, Full-time Part-time Hours Per Week: _____

Employer _____ Position _____ Start Date _____

Previous Employer _____ Position _____ Start Date _____

Financial Information

If you have completed the FAFSA (Free Application for Federal Student Aid) please reference that information for this portion of the application. If you have not completed a FAFSA, please use current tax return forms or estimated information.

Please select which of the following you are gathering financial information from:

Filed Tax Return Forms FAFSA Estimated Information

If you were born before January 1, 1996 and/or are married you do not have to provide parental information

Parent(s)/Guardian(s) Adjusted Gross Income 2019 (dependent students only) \$ _____

How much did your first parent(s)/guardian(s) or earn from working in 2019 (dependent students only) \$ _____

How much did your second parent(s)/guardian(s) or earn from working in 2019 (dependent students only) \$ _____

Student (and Spouse) Adjusted Gross Income 2019 \$ _____

If family income has changed for 2020/2021 please explain

Certification and Release

I certify that the information provided on this application, including attachments, is true and correct to the best of my knowledge. If requested, I agree to provide additional information for verification purposes. If selected for the MCF Scholarship, I grant MCF the permission to use my name, non-confidential information and portion of submitted material for support or promotion of MCF's programs.

Signature: _____ Date: _____

For Office Use:

Term/Date: _____ Referral Partner (If Any): _____

Accept Date _____ Thank You Note _____ Notification: _____

Recommendation: Decline Approve Amount: _____

Comments: _____