

Must be received by May 1st 2024.

MAIL TO: MFDA• 233 Rock Road, #205 • Glen Rock, NJ,07452 or email: mfdaboard@gmail.com

Applicant:

Last Name:

First Name:

Date of Application:

MFDA Company :

Child of Employee

Employee

Instructions and Information

Eligibility

- A child whose parent or guardian is employed by an MFDA member firm, and is a full-time student of an accredited college, university, or higher educational learning/vocational center.
- Employees of MFDA member firms, and their families, working at least twenty (20) hours per week and taking a minimum of six (6) credit hours per semester at an accredited college, university, or higher educational learning/ vocational center.

Selection Criteria

- Academic records including SAT/ACT scores.
- Essay*, school activities, community involvement and work experience.
- · Financial need will be considered, as a secondary factor.

Information

1. All Applications Must be Received No Later than May 1st, 2024

- 2. Include a picture with your application for press publicity. (not required)
- 3. All appropriate sections of the application MUST be completed.
- 4. It is each applicant's responsibility to be certain that a company sponsor signs the application before it is submitted to the MFDA Scholarship Committee.
- 5. In order for the application to be processed and a scholarship awarded, applicants MUST submit (1) a copy of their official letter of acceptance or review for acceptance to an accredited college, university, or higher educational/ vocational learning center (if High School class of 2024) or (2) proof that student is enrolled full-time in an accredited college, university, or higher educational/vocational learning center (if not a graduating HS senior)
- 6. Past scholarship winners are not eligible to reapply.
- 7. Scholarship awards will be given directly to the students at the MFDA Scholarship Meeting.

Questions? email: mfdaboard@gmail.com

*Essay Format: Line spacing: 1½ lines Font: Times New Roman #12 Pitch

MFDA Scholarship Application

Personal Information: (please print)

Name				Address			
City					State	Zip	
Home Phone (()	Fax:	()				
Email							
Sponsor Cor	mpany Informatio	on: (please prin	t)				
Firm Name							
Address				City			
State	Zip	Phone	()		Fax: ()		
Email							
lf you are requ	uesting a scholars	nip as an emplo	yee of an Mi	-DA member firm: (μ	please print)		
Position held: _				Date Hired:	Hours worked	per week:	
Does your firm	offer tuition reimbur	sement? Ye	s 🕅 🛛 No 🕅	1			
If you are a hig	gh school senior (child of a fasten	er industry e	employee): (please p	print)		
Name of paren	t or guardian emplo	yed by the MFDA	Member firr	n:			
Position held: _			_ Date Hired	1:	Hours worke	d per week:	
Does their firm	offer tuition reimbur	sement? Yes	n No h)			

Application Requirements

HS Seniors:

- 1. An official transcript of your high school grades, including class ranking. Include the first half of your senior year.
- 2. Two letters of recommendation from your high school teachers and/or advisors.
- 3. An official transcript of your SAT and/or ACT scores. If you did not take an SAT or ACT test because your college is test optional, please send information from school stating that. AP test results will also be considered.
- 4. A letter of acceptance from one accredited college to which you have applied for admission, (if you have not yet received an acceptance, enclose a letter from at least one college indicating your application is under review).
- 5. A 500-word essay indicating your reason for applying for a MFDA scholarship. (Hint: Include your personal goals.)

Students currently attending college/university/vocational school.

- 1. An official transcript of grades. Please include fall 2023 semester
- 2. Two letters of recommendation from your teachers and/or advisors.
- 3. An official transcript of your SAT and/or ACT scores. If you did not take an SAT or ACT test because your college is test optional, please send information from school stating that. AP test results will also be considered.
- 4. A 500-word essay indicating your reason for applying for a MFDA scholarship. (Hint: Include your personal goals.)

Employees of Member Firms

- 1. An official transcript of your current grades if you are currently enrolled in an accredited college.
- 2. A letter of acceptance from one accredited higher educational facility, if you are an entering student.
- 3. Two letters of recommendation (preferably at least one from your supervisor at work).
- 4. A 250-word essay indicating your reason for applying for a MFDA scholarship, including your personal goals.
- 5. Must be employed by the member firm for at least one (1) year.

Education (please print)

A. Nume a address of the senot	ol you currently attend: Name	·			
Address		City	State	Zip	
B. Type of School: APublic A	Private Á				
C. Date (or anticipated date) of g	graduation: T	ype of degree (if applicab	le):		
D. How is your school's grade p	oint scale calibrated: A=	B= C= D	= F=		
E. Does your school adjust grad	e point averages for honors a	and/or advanced placeme	nt courses?		
Yes No If yes, A=_	B=C=D=	F=			
F. Name and location of college(s) for which you have applied	d, currently attend, or have	e been accepted to:		
Please list your school, commun accomplishments. If this occurre	ity, and family activities in the d during the summer, please	order of its interest to yo indicate with an "*".	u. Include specific event	s and/or major	
Personal/School Related Activities	Years participate		Positions Held/Awards Earned/ School Letters Awarded/College Credits Earned		
			Positions Held/Awards Earned/ Commendation Letters Awarded		
Volunteer Activities	Years participate				
	Years participate				
	Years participate				
	Years participate				
	Years participate				
	Years participate				

Company Name	Ref. Name & Telephone No.	Dates Hrs./Week	Job Description

Financial Aid

Please list any financial aid for which you have been approved, as well as the amount. This includes private scholarships, college grants, loans, work-study programs, federal Pell Grants, Stafford Loans, or any other federal, state, business or local financial assistance for college undergraduates.

Description of Source of Funds/Scholarship	Amount
Do you plan to work during the academic year to help cover expenses? Yes 🗌 No	
If yes, please indicate the approximate number of hours per week and anticipated annual	earnings.
No. of hours worked during school: Anticipated Earnings: \$	
No. of hours worked during school break: Anticipated Earnings: \$	
Are there other persons dependent on your earnings? Yes \mathbb{N} No \mathbb{N} If Yes, indicate th	e relationship and the extent of your support.
Extraordinary Circumstances	ability to offered college or a bigher
*If a special hardship or other extraordinary circumstances exist which would hinder your educa-tional/vocational facility, please describe your situation in a 250-word essay and at *(<i>Follow Essay format page 1</i>)	
Applicant's Statement	
I affirm that all information contained in this application is true and correct. I understand an made only if I am officially accepted at/or are currently attending an accredited college, ur learning center and will provide a copy of the acceptance letter/class registration info to th any college, university, higher educational learn-ing/vocational center, individual, or other biographical, financial, or academic data concerning me to the MFDA Scholarship Commi	iversity, or higher educational/vocational e MFDA Scholarship Committee. I authorize source named herein to release any
Applicant's Signature	Date
Applicant's Name (print)	
Sponsor's Signature	Date
Name & Title of Sponsor at MFDA Member Firm (print)	
Did you include?	
Signed School Transcript All Applicable Essays College Acceptance Letter	
SAT/ACTTranscript/Scores Picture (for publicity) All Signatures	
Signed Transcript of College Credits (if applicable)	

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