AADE MID-CONTINENT CHAPTER
MEMORIALSCHOLARSHIP APPLICATION
Nate Fleming and Paul E. Legg
(Please Type or Print)

Date: _____

Name Mr. Ms. Mrs. Last First Middle

Home Address:

_____
Street Number, FRD or Box City State Zip

Phone: (_____)_____ Email _____

Birth date:_____ Student ID or SSN_____

Parents name: _____

Parents Address: _____

City_____ State_____ Zip_____ Phone(_____) _____

Are you married? _____Yes _____ No Number of legal dependents other than spouse: _____

Your family's household income (Check ONE): _____ Less than $25,000 _____$26,000 - $40,000

_____ $40,000 - $60,000 _____ Over - $60,000

Number of brothers and sisters in your family (excluding yourself): _____ Number currently in college: _____

What college(s) are they attending? _____

Did/do you have an outside job while attending high school/college (including summers)? _____Yes _____ No

IF YES: _____ Part-time _____ Full-time _____ Summer Only Number of hours per week: _____

Did you have to work to support or assist your family? _____ Yes _____ No

Any comments or special hardships? _____

Have you been awarded any other scholarships? _____ Yes _____ No If so, How much_____

What school do you plan to attend if awarded the AADE Scholarship? _____

Approximate date of registration: _____

Please indicate your current classification in your undergraduate course of study_____

What degree are you pursuing? _____

What career choices are you considering: 1st choice _____

2nd choice _____ 3rd choice _____

Explain any time gaps between non-consecutive college semesters or between high school graduation and college

enrollment: _____

What are your hobbies? _____

Personal Essay: On an additional sheet of paper write a brief essay stating your educational goals, your career objectives, and how your choice of school will help you in achieving these goals. Please limit essay to one type-written page, double spaced.

Attach a certified copy of your current transcript.