AADE MID-CONTINENT CHAPTER MEMORIALSCHOLARSHIP APPLICATION

Nate Fleming, Paul E. Legg and Scotty Turner (Please Type or Print)

Name	Mr. Ms. <u>Mrs. Last</u>	First	Middle
Home			
Addres	s: Street Number, FRD or Bo	x City	State Zip
Phone:	()	Email	
Birth da	date: Student ID or SSN		SSN
Parents	name:		
			Phone()
Are you	ı married?Yes No Nu	umber of legal dependents other tha	ın spouse:
		NE): Less than \$25,000	
		\$40,000 - \$60,000	Over - \$60,000
Numbe	r of brothers and sisters in your fan	nily (excluding yourself):	
		,	
What co	ollege(s) are they attending?		
Did/do y	you have an outside job while atter	nding high school/college (including	summers)?Yes No
IF YES:	Part-time Full-tim	e Summer Only	Number of hours per week:
Did you	have to work to support or assist y	your family? Yes	No
Any cor	mments or special hardships?		
Have yo	ou been awarded any other scholar	ships? Yes No If s	o, How much
What so	chool do you plan to attend if award	ded the AADE Scholarship?	
Approx	imate date of registration:		
Please i	ndicate your current classification i	n your undergraduate course of stud	dy
What de	egree are you pursuing?		
What ca	areer choices are you considering: '	I st choice	
		3 rd choice	
			n high school graduation and college
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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.