

**AADE MID-CONTINENT CHAPTER
MEMORIALSCHOLARSHIP APPLICATION**
Nate Fleming, Paul E. Legg and Scotty Turner
(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.