

MARY FLY MEMORIAL SCHOLARSHIPS FOR DRIVER EDUCATION

Application Form

Information to be completed by Applicant (Please Print Clearly)

NAME:

Last _____ First _____ Middle Initial _____

MAILING ADDRESS: Street or P.O. Box # _____
 City _____ State _____ Zip _____

RESIDENCE: If Different
 City _____ State _____ Zip _____

EMAIL: Student: _____ Mother _____ Father _____

CELL: Student _____ Mother _____ Father _____

PHONE: Home _____ Other (Specify) _____ Other (Specify) _____

SCHOOL ATTENDING _____ **AGE AT APPLICATION** _____ **DATE OF BIRTH** _____ **GRADE** _____

STUDENT IS LIVING WITH _____ **NAME OF PARENTS/LEGAL GUARDIANS** _____

OCCUPATION: Mother _____ Father _____

EMPLOYER: Mother _____ Father _____

IS FINANCIAL NEED BASED ON FINANCIAL CIRCUMSTANCE OF MOTHER, FATHER, BOTH OR OF GUARDIAN? _____

PLEASE REMEMBER THAT THIS IS A NEED-BASED SCHOLARSHIP

Do you currently have a driver's instruction permit? Yes _____ No _____

Do you currently have a driver's License? Yes _____ No _____

PLEASE ANSWER THE FOLLOWING QUESTIONS, USING A SEPARATE PAGE.

READ EACH QUESTIONS CAREFULLY AND GIVE THOUGHTFUL ANSWERS.

PREPARE YOUR ANSWERS YOURSELF.

YOUR ANSWERS TO QUESTIONS 1 THROUGH 4 MAY BE PUBLISHED

1. Why have you chosen to apply for this scholarship?
2. How have you demonstrated a sense of responsibility and dependability in your everyday life?
3. Do you have any activities or commitments such as a job or sports that would interfere with your attendance at Driver Education classes? If so, how would you handle potential conflicts?

4. Please respond to all of the following questions in one page or less.

A. How does driving safely affect me?

B. What are the challenges of driving in the Evergreen/Conifer/Bailey/Clear Creek area?

C. How does driving safely affect the other drivers on the road?

5. Please list activities and organizations you are involved with at your high school. Please note offices you hold or responsibilities you have within this group.

6. Please attach a transcript from your counseling office of your high school.

CONFIDENTIAL-THIS ANSWER WILL NOT BE PUBLISHED

7. Please describe special circumstance which lead to your needing this financial aid for driver's education that you feel the selection committee should know (unusual expenses, family difficulties, etc.). *We need to consider the income, special circumstance, etc. of both parents (especially in a divorce situation) or all guardians.* Please be very specific with your answers. *This part may be completed by the student or the parent(s).*

STUDENTS AND PARENTS/GUARDIANS: PLEASE BE SURE TO COMPLETE THE APPLICANT STATEMENT AND THE PARENT/GUARDIAN STATEMENT. SEE GENERAL INFORMATION PDF.