

Mel Lindauer Eyes to the Future Scholarship Program 2019

Overview

- DEADLINE for scholarship applications is 5 pm, Friday, April 19, 2019.
- Refer to criteria below for eligibility requirements.
- Refer to application process below for a list of the supporting documents needed (i.e., Application form, Consent and Release form, Statement of Accuracy form, Personal Essay). Incomplete applications will not be considered.
- Type or print legibly. Illegible applications will not be considered. A copy of the application package is available online at www.MelLindauerScholarship.com.
- Scholarship award winners will be notified by May 3, 2019.

NOTE: Disbursement of scholarship funds will be awarded to the student upon evidence of registration in an accredited post-secondary institution.

Purpose: To provide a scholarship to one (1) Eastern Washington high school graduating senior interested in or intending to pursue post-high school course of study at either college/university or other post-secondary educational institution.

Award Components: One (1) \$500 scholarship and individual certificate awarded to one (1) student selected by the **Mel Lindauer Eyes to the Future Scholarship Program** Committee.

Criteria:

- Applicant must attend a Washington State high school located in Ferry, Okanogan, Stevens, Pend Oreille or Spokane County.
- Applicant must be a graduating high school senior in the year of the award.
- Applicant must demonstrate a strong motivation to achieve positive-impact personal/community goals as described in a concise, persuasive argument in his/her original essay.

Application Process:

Applicant must submit the following items:

- Completed Application Form (if handwritten, please print legibly).
- Personal Essay: **Many successful people do not attend college. Why do you feel it is important for you to get a college degree to succeed?**
- Signed Consent and Release Form.
- Signed Statement of Accuracy Form.

Deadline: 5 p.m., Friday, **April 19, 2019**. Applications postmarked or delivered after this date will not be considered.

Please submit your application to:

**Mel Lindauer Eyes to the Future
Scholarship Program 2019**
513 E Hastings Rd STE C
Spokane, WA 99218-1977

REMEMBER: The submission deadline is 5 p.m., Friday, April 19, 2019

Mel Lindauer Eyes to the Future Scholarship Program 2019 Application Form

Please **type** or **print** your answers. If application is illegible it will not be considered.

1.	Last Name:	First Name:
2.	Mailing Address::	
	Street: _____	
	City:	Email address: _____
3.	Daytime Telephone Number: () _____	
4.	Date of Birth: Month Day Year	
5.	Current High School:	Years attended:
	Location: Ferry County ___ Okanagan County ___ Stevens County ___ Pend Oreille County ___ Spokane County ___	
6.	I expect to be attending one of the following schools in the <u>Fall of 2019</u> :	

	Proof of acceptance or current student enrollment from an accredited post-secondary institution is required prior to release of funds.	
7.	Name & address of parent(s) or legal guardian(s):	
	Name (s)	

	Street: _____	City: _____ State: _____
	ZIP: _____	Home or cell phone of parents or legal guardians: _(_____) _____

8.	<p>Personal Essay</p> <p>Many successful people do not attend college. Why do you feel it is important for you to get a college degree to succeed?</p> <p>Please type double-spaced, 12pt Arial or Times Roman font, or print legibly. Please limit your answer to 300 words or less.</p>
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9.	<p>A. The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>Circle "YES" or "NO" to be sure you have attached each item as required.</p>		
	YES	NO	Your Personal Essay
	YES	NO	Signed Consent and Release Form
	YES	NO	Signed Statement of Accuracy Form

Mel Lindauer Eyes to the Future Scholarship Program 2019 **Statement of Accuracy Form**

I hereby affirm that all the information stated on the Application Form provided by me is true and correct to the best of my knowledge. I also affirm that the Personal Essay I am submitting is my own original work.

I hereby understand that if chosen as the scholarship winner, according to ***Mel Lindauer Eyes to the Future Scholarship Program*** policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Applicant Signature: _____ Date: _____

Mel Lindauer Eyes to the Future Scholarship Program 2019
Personal Essay

**Many successful people do not attend college.
Why do you feel it is important for you to get a
college degree to succeed?**

(You may staple a separate page to this sheet if preferred.)

Mel Lindauer Eyes to the Future Scholarship Program 2019 Consent and Release Form

I hereby grant the **Mel Lindauer Eyes to the Future Scholarship Program** authorization to use my name and photographic likeness in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of the **Mel Lindauer Eyes to the Future Scholarship Program** and will not be returned.

I hereby irrevocably authorize the **Mel Lindauer Eyes to the Future Scholarship Program** to edit, alter, copy, exhibit, publish or distribute said photo(s) for purposes of publicizing the **Mel Lindauer Eyes to the Future Scholarship Program** and/or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears.

Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge the **Mel Lindauer Eyes to the Future Scholarship Program** from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am over 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

(Signature of applicant)

(Date)

(Printed Name)

If the person signing is under age 18, there must be consent by a parent or guardian, as follows:

I hereby certify that I am the parent or guardian of _____, named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

Parent/Guardian's Signature)

(Date)

(Parent/Guardian's Printed Name)