Student Veteran Scholarship Application

Funded in partnership by the Flint Hills Veterans Coalition

Administered by Manhattan Area Technical College

The Flint Hills Veterans Coalition established this scholarship in recognition of the academic dedication and leadership of Manhattan Area Technical College student veterans. The scholarship will be awarded to a student who demonstrates academic commitment, leadership, and financial need. There will be two recipients of the Student Veterans Scholarship per academic year, with one (1) \$500 scholarship awarded in the fall semester and one (1) \$500 scholarship awarded in the spring semester.

The following criteria will be used to select the scholarship recipient:

- The recipient must be a U.S. military service member currently serving or honorably discharged veteran.
- The recipient must be a <u>full-time undergraduate student</u>, in good standing, enrolled in a degreeseeking program at Manhattan Area Technical College.
- Student may receive this scholarship during one academic year only, both \$500 scholarships may be awarded to the same student if chosen by FHVC. Student will not be eligible in other academic years for this scholarship.

HOW TO APPLY

- 1. Fill out the application form on the reverse side.
- 2. Submit a one-page, typed summary describing
 - Your academic and career goals, and your plans toward achieving them
 - A personal essay of your financial need
 - Any unique circumstances you may be facing
 - Information regarding your prior service (i.e. branch and dates of service, tours served, awards received, etc.)
- 3. Submit application packet on time. Late or incomplete applications will not be considered.
- 4. The scholarship recipient may be asked to speak at a Flint Hills Veterans Coalition event.
- 5. Please write your name and MATC student ID on all attachments.
- 6. Check all that apply:
 - □ Undergraduate Student
 - □ First-Time Recipient
 - Degree Program_
 - □ Veteran, Current Guard/Reserve

Student Veteran Scholarship Application Form

Please com	plete the following: (Type or prin	nt clearly) Date:	
Name		MATC ID:	
Local Add	ress	Phone #	
City			
State & ZI	P Code	Email	
Honors, ac	hievements, or scholarships:		
Other colle	ges attended:		
Hours com	pleted toward degree (including t	ransfer credits):	
MATC date of entry:		MATC: Total Hours	GPA
		Transfer: Total Hours	GPA
Signature _		Date	
Return to:	Manhattan Area Technical Colle Attn: Office of Financial Aid 3136 Dickens Avenue Manhattan, KS 66502	ge	