

PETOSKEY EDUCATION FOUNDATION
MIDDLE SCHOOL SCHOLARSHIPS
APPLICATION INFORMATION

THIS FORM IS AVAILABLE ONLINE AT
[PEF SCHOLARSHIPS](#)

Petoskey Education Foundation Undergraduate Scholarships will be awarded to Petoskey Middle School students, currently in the 6th, 7th or 8th grade, who have an interest in furthering their education by taking summer instructional programs related to science, technology, music, leadership, debate, visual arts or other academic endeavors.

PLEASE NOTE THAT FUNDING IS **NOT** AVAILABLE
FOR BAND CAMP AND/OR OTHER SCHOOL-SPONSORED SUMMER ACTIVITIES.

Merit scholarships in amounts up to \$500 each will be awarded for summer study.

To be considered for this award:

- 1. COMPLETE THIS APPLICATION FORM**
- 2. RESPOND TO THE APPLICATION QUESTIONS ON ONE TYPED, ATTACHED PAGE**
- 3. SUBMIT A LETTER OF RECOMMENDATION FROM A PMS TEACHER**

Scholarship applications that do not contain all of the above will not be considered

ACKNOWLEDGEMENT AND PHOTO RELEASE

The undersigned applicant hereby acknowledges that any scholarship awarded pursuant to this application must be fully used during the summer of the year it is awarded or it will be cancelled.

The undersigned applicant hereby grants permission to the Petoskey Education Foundation to use his/her photograph and/or name in any medium - print, electronic or otherwise - for promotional purposes, without compensation, and waives any right to privacy claims and/or any other claim in connection with such release, which has no expiration date.

Date: _____ Applicant signature: _____

Since the applicant is not 18 years of age, his/her parent or guardian *must* sign the acknowledgement and photo release on behalf of the applicant.

Date: _____ Parent/Guardian signature: _____

COMPLETE APPLICATIONS MUST BE RETURNED TO THE PMS FRONT OFFICE
NO LATER THAN 3:30 p.m. on APRIL 15 (if it falls on the weekend,
please turn in no later than the following Monday)

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APPLICATION FORM

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NAME _____ GRADE _____

ADDRESS _____ CITY _____

PARENTS/GUARDIAN _____

PARENT EMAIL ADDRESS _____

HOME PHONE _____ CELL PHONE _____

WHERE DO YOU WANT TO ATTEND? _____

INTENDED COURSE OF STUDY _____

COST OF PROGRAM _____

PLEASE ATTACH ONE TYPED PAGE AND RESPOND TO EACH OF THE FOLLOWING:

- What do you expect to gain from this course of study?
- Please describe any training or experience you have had in this area of study.
- Please describe any awards, honors or recognitions you have received in this area of study.
- Why are you uniquely qualified to receive this scholarship?

Please attach a letter of recommendation from a PMS teacher.

A second recommendation letter from an instructor in your specific area of interest may also be included with your application but is not required.

Signature of Applicant

Signature of Parent

Date

Date

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