The Warthogs M/C – Salem Chapter # 31

Who is eligible:

You are eligible to apply for the Skip Gage Memorial Scholarship if you are in need of financial assistance in order to continue your education in law enforcement or firefighting and you meet at least one of the following criteria:

- 1. A high school senior currently enrolled in a public or non-public school.
- 2. A person currently enrolled in a police academy.
- 3. Have been accepted by an accredited university or college as a student in a criminal justice or fire fighter course of study commencing in the fall following your high school graduation.
- 4. Be the son or daughter of a fully patched Warthog M/C member.
- 5. Be the son or daughter of a police officer or fire fighter.

How to apply:

Completed application forms for up to \$1,000.00 award must be postmarked no later than May 1st of the year of your high school graduation and mailed to:

Warthogs M/C – Salem Chapter c/o Stacey Trott 1171 Beta Walled Lake, MI 48390

All other non-high school applicants should follow instructions given to you by the Salem Chapter President or an Executive Board Member.

How the winner(s) is selected:

The Scholarship winner(s) will be selected by the Warthogs M/C – Salem Chapter, Skip Gage Scholarship Fund Committee on the basis of applications submitted by the required date. Each application will be given a fair and careful evaluation. The Warthogs M/C – Salem Chapter, Skip Gage scholarship Fund Committee will determine how many recipients and the dollar amount of each scholarship awarded. The Warthogs M/C – Salem Chapter pledge to give away at least \$500.00 each year.

Restrictions:

Scholarship funds are intended to be used towards the recipient's college expenses including tuition, fees and books. The scholarship award will be made payable jointly to the recipient and college, university or academy.



SKIP GAGE MEMORIAL

Police and Fire Scholarship Fund

APPLICATION

Last Name, First: Telephone N								Number			
Street Address				City				State	Zip		
Date of Birth Soc Sec Number				r High S				High School G	chool Graduation Date		
Mother's Name				Mother's Occupation					Warthog Member? Yes No		
Father's Name				Father's Occupation					Warthog Member? Yes No		
Name of Post-Secondary School you will be attending after high school graduation											
Street Address					City			State	Zip		
Major/Course of study applicant plans to pursue					How will you finance your first year of college						
Have you received, or do you anticipate receiving financial assistance of any kind in order to continue your education? If yes please explain in detail No Yes:											
Work experience during the last four years											
Dates Start End		Name of Employer		Posit		ion / Job Duties		Hours pe	er week		
Sponsoring / Referring Warthog Member											
Name Moniker Chapter							Chapter				
Explain why you feel you should be awarded the Skip Gage Memorial Scholarship. Attach a paper (include your name) of no more than 2 ½ pages stating reasons. The paper should review your school and community activities during the past four years. You should state your future educational and career goals as well as current financial needs.											
Applicant Signature Date									·		
	Submit this completed application with all applicable attachments no later than May 1 st of the current year. All information contained in this application and attachments will be held in confidence.										