

**Third Marine Division Association – Memorial Scholarship Fund (MSF)**  
**Application for the 2018-2019 Academic Year – Due no later than April 17, 2018**  
**All information must be completed or marked n/a, in black or blue ink, printed legibly or typed**

**Section A – Student Applicant Information**

Name (Last, first, middle) \_\_\_\_\_

Title: Mr. Ms. \_\_\_\_\_ DOB: (Month, day, year) \_\_\_\_\_ SSN \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Permanent Home Address:

- \_\_\_\_\_
- \_\_\_\_\_

During the 2018-2019 academic year Applicant requests financial aid from (Mo/Yr) \_\_\_\_\_ through \_\_\_\_\_ while attending:

- School Name, city state: \_\_\_\_\_
- **Financial Aid Office's** formal name (e.g. Bursar, Office of Financial Aid) and Mailing Address: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Academic Major **or** Undecided \_\_\_\_\_ **Expected** Gradation Date (Mo/Yr) \_\_\_\_\_

Applicant's Employment/Occupation for Summer: June – August 2018 and School Year: September 2018 – May 2019

Applicant has applied for or received federal, state or private student loans for these academic years:

- Estimate for 2018-2019 (Detailed below): \$ \_\_\_\_\_ **Actual** Received for 2017-2018: \$ \_\_\_\_\_

College(s) previously attended as of the date of this application dates from (mo/year) to (mo/year):

**Applicant's Estimates for 2018-2019**

<b>Applicant's Income and Funds</b>	<b>2018-2019</b>	<b>School cost estimate:</b>	<b>2018-2019</b>
Summer work income <b>Jun-Aug</b>	\$ _____	Tuition	\$ _____
School year work income <b>Sept-May</b>	_____	Mandatory Fees	_____
Cash, savings, investments	_____	Room and Board ( <b>Note a</b> )	_____
Total	<u>\$ _____</u>	Books & Supplies	_____
<u>Sources of Funds for Education:</u>		Transportation ( <b>Note a</b> )	_____
Scholarships/Grants - School	_____	Other- Detail Below	_____
Scholarships/Grants - Other	_____		_____
Student Loans - Federal & State	_____		_____
Student Loans - Private	_____	Total	\$ _____
Financial Aid/Grants - Federal	_____		
Financial Aid/Grants - State	_____		
Financial Aid/Grants - Other	_____		
Family contribution (same as Page 2)	_____		
Other funds	_____		
Total	<u>\$ _____</u>		

**Note a:** These costs are only for students attending school away from their legal residence which requires significant travel to reach the school. Students living at home or commuting shall not list these costs. Transportation is for travel **to and from home** for the school year and official breaks, i.e. for holidays.

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**Section B – Sponsor/Family Information**

The **SPONSOR** can be a parent, grandparent, great grandparent or the legal guardian of the applicant and must be a Third Marine Division Association member in good standing for at least two (2) consecutive years immediately prior to the date of the first MSF application and continue such membership for the entire period of the applicant's assistance under the MSF program. **The Eligibility Requirements are on page 6** of this application form. Enter the following information.

**SPONSOR** – Applicant is sponsored by the following person:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
(Parent, grandparent, great grandparent or guardian)

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

Third Marine Division Association Member: Annual \_\_\_ Life \_\_\_ **Member #** \_\_\_\_\_

**Family Information**

**If married:** Spouse's Name \_\_\_\_\_

Address if not the same as applicant. \_\_\_\_\_

**(Circle one) Father/Legal Guardian - Name** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Occupation \_\_\_\_\_ Employed \_\_\_ Unemployed \_\_\_ Date last employed \_\_\_\_\_

Employer name, address \_\_\_\_\_

VA Certified Service Connected Disability? Circle one: Yes No. **If Yes, Percent** \_\_\_\_\_%

**((Circle one) Mother /Legal Guardian - Name** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Occupation \_\_\_\_\_ Employed \_\_\_ Unemployed \_\_\_ Date last employed \_\_\_\_\_

Employer name, address \_\_\_\_\_

VA Certified Service Connected Disability? Circle one: Yes No. **If Yes, Percent** \_\_\_\_\_%

What amount will the spouse/parents/legal guardians contribute to the Applicant for the 2018-2019 school academic year costs? \$ \_\_\_\_\_ (Should be the same as on Page 1 "**Family Contribution**")

**Applicant's Siblings/Step Siblings:** (Attach a separate sheet if required)

Names, ages and school name and year (Grades 1-8, Fr So Jr Sr Grad) if applicable. Note if they have been past MSF awardees.

\_\_\_\_\_  
\_\_\_\_\_

**Divorced, separated or remarried parents** (Complete if applicable) or Circle: **N/A**

Year of separation or divorce \_\_\_\_\_ Who claimed Applicant as a dependent on their 2017 tax return: \_\_\_\_\_

Court ordered or voluntary support \$ \_\_\_\_\_ per month. When will support end, (mo/year) \_\_\_\_\_

Other parent's name \_\_\_\_\_ Will they contribute to Applicant for 2018-2019? \$ \_\_\_\_\_

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**Parental Financial Data, 2017 Actual 2018 Estimated:**

Parents' Income - Actual 2017 per tax return, Estimated for 2018:

	<b>2017 Actual</b>	<b>2018 Estimate</b>	
Adjusted Gross Income from	\$ _____	\$ _____	
- IRS Form 1040, A, EZ			1040 line 37, 1040A line 21, 1040EZ line 4
Non Taxable VA Disability	_____	_____	
Tax exempt interest	_____	_____	
Tax exempt dividends	_____	_____	
Non Taxable Pensions & Annuities	_____	_____	
Non Taxable Roth Distributions	_____	_____	
Non Taxable social security benefits	_____	_____	
 Total	 \$ _____	 \$ _____	

**Parents' Financial Assets – as of the date of this application signed on page 5**

Assets:

Cash, savings, checking	\$ _____
Net worth of investments	_____
Net worth of business/farms	_____
College 529 Savings Plan	_____
IRA, 401(k), 403(b), or 457	_____
Roth IRA or Roth 401(k)	_____
Total Assets	\$ _____

<b>Net worth is Fair Market Value less related debt and amounts owed on the asset</b>
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Home(s) Fair market value	\$ _____
Mortgage amount	_____
Net Home Value	\$ _____

Mortgage Payment monthly, OR	\$ _____
Rent payment monthly	\$ _____

**Explain below or attach as a**

**separate statement** any explanations or amplification concerning the parents' financial information above that would give more insight for the Board of Trustees in their evaluation process.

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**Student's Financial Data, 2017 Actual 2018 Estimated:**

Is Student married?: Circle one: Yes No

**If married** enter the combined data for the student and spouse below from their Joint Tax return or Separate tax returns.

Income 2017 per tax return, Estimated for 2018:

	<b>2017 Actual</b>	<b>2018 Estimate</b>	
Adjusted Gross Income	\$ _____	\$ _____	IRS 1040 line 37, 1040A line 21, 1040EZ line 4
- IRS Form 1040, A, EZ	_____	_____	
Non Taxable Income - List below	_____	_____	
-	_____	_____	
-	_____	_____	
-	_____	_____	
 Total Income	 \$ _____	 \$ _____	

**Financial Assets – as of the date of this application on page 5**

<b><u>Assets:</u></b>		<b><u>Liabilities:</u></b>	
Cash, savings, checking	\$ _____	Student loans federal & state	_____
College 529 Savings Plan (Student's)	_____	Student loans private	_____
Other Assets - list below	_____	Other Loans - list below	_____
	_____		_____
	_____		_____
 Total Assets	 \$ _____	 Total Loans	 \$ _____

**Explain below or attach as a separate statement any explanations or amplification concerning the Student's financial information above that would give more insight for the Board of Trustees in their evaluation process.**

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Section C - Required Documents to be submitted with this application. Please delete all Social Security Numbers. from all documents submitted

First time applicants only:

- Copy of birth certificate or adoption papers.
- Most recent transcript, Fall 2017 original copy in a school secure envelope or email see Section D 5. below.
- Copy of 2018-2019 college or university acceptance letter
- Married applicants. Copy of a marriage license that is a document issued, either by a church or state authority, authorizing a couple to marry.

All applicants:

- Copy of the School's annual cost of attendance detailed by line item for the 2018-2019 school year (tuition, fees, room & board, books, supplies) usually on the school website. This should be for "School Cost" on page 1.
- Recent **2-1/2 x 3-1/2 (wallet size)** photo suitable for publication, original on regular photo paper. See Section D. 7 below.
- A copy of the Applicant's "Free Application for Federal Student Aid" (**FAFSA**) form for the 2018-2019 year as filed. Note: this form should be completed as soon as possible after January 1, 2018.
- For prior year 2017-2018 MSF awardees if they have not done so, the Fall 2017 transcript report see D 5. below.

Section D – Agreement between the Applicant and MSF and Contact Information

1. We attest that the Applicant named in this form is fully qualified to receive assistance from the Third Marine Division Association's Memorial Scholarship Fund (MSF) as the legally dependent child, natural or legally adopted, or as a grandchild or great-grandchild of a member of the Association with at least two full years of continuous membership as of the date below which this request for assistance is submitted.
2. We attest by our signatures below to the truthfulness and completeness, as known to us, of all answers regarding "Estimated Costs" for the school to be attended and to the "Financial Assets", "Income" and "Estimated Income" sections of this Application. We agree to promptly provide any such additional information or clarification relevant to school costs, living arrangements, supplies, fees, transportation, personal expenses, etc., as may be requested
3. We agree to promptly advise the Secretary of the MSF Board of Trustees of any changes to this Application as originally submitted, and particularly any changes to the financial information regarding "Income" as submitted herein such as new scholarships, State and/or Federal grants/awards, etc
4. We agree to immediately notify the MSF Secretary if the Applicant, for any reason, fails to start school as indicated on this Application, withdraws from the indicated school after an award check has been mailed to the indicated institution, or transfers to a school other than the one indicated in this Application.
5. We agree that semester grade reports will be sent to the Secretary, MSF after the end of each semester to verify continued academic performance (**Cumulative GPA of 2.5 or higher**) and that semester grade reports must be original official documents from the educational institution which includes secure/encrypted emails from the school registrar sent to the MSF Secretary. On-line printouts or copies are unacceptable. Grade reports from the educational institution must show the student's name, semester GPA and cumulative GPA. We also agree to submit a new Application annually for any future MSF assistance requests by the Applicant, such Applications to be used by the MSF Board of Trustees to determine on-going "need." We acknowledge that the MSF Board of Trustees, Third Marine Division Association, retains total and complete control and determination of award recipients, award amounts, and related decisions, and their findings are final and binding, without recourse or appeal for such actions by any person or group.
6. Award recipients will provide the Secretary, MSF their U. S. Postal Service personal mailing address and e-mail address at the educational institution they are attending within two weeks of the start of the Fall 2018 Semester.
7. I hereby grant the Third Marine Division Association Inc. (Assn) permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration. I understand and agree that all photos will become the property of the Assn and will not be returned. I hereby irrevocably authorize the Assn to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my

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likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo. I hereby hold harmless, release, and forever discharge the Assn 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 have read and understand the above photo release, I affirm that I am at least eighteen (18) years of age and have obtained the required consent of my parents or guardians as evidenced by their signatures below.

**8. Review the Eligibility Requirements on the next page before signing. Signatures:**

- Applicant \_\_\_\_\_ Date \_\_\_\_\_
- Father/Step/Guardian \_\_\_\_\_ Date \_\_\_\_\_
- Mother/Step/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Return this completed application with the Section C required documents by **US Mail (Must be received no later than April 17, 2018)** to:

Patrick J. Conroy  
MSF Secretary  
PO Box 2296  
Stow, OH 44224

**Direct questions or comments** to the MSF Secretary's email at [ConroyPJ11@aol.com](mailto:ConroyPJ11@aol.com)

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**Memorial Scholarship Fund 2018-2019 Academic Year**

**Eligibility Requirements:**

1. **Each academic year requires a new application** to be submitted in its entirety. The MSF Secretary will send the application form for the new academic year to current MSF awardees provided they have met all of the requirements relating to the prior academic year, i.e., submitted transcripts on a timely basis, achieved the required GPA, etc.
2. Applicants shall have a minimum cumulative Grade Point Average (GPA) of 2.50 or higher at the time of the initial application; and shall maintain a minimum cumulative Grade Point Average (GPA) of 2.50 or higher to demonstrate academic proficiency and continue in the program
3. Awards may be awarded for any approved course of study in an accredited college or university, **or** for any approved course of study in an accredited and approved post-high school trade school-type institution. Awards will not be given in excess of four (4) years of undergraduate study except for those accredited degreed programs where the undergraduate requirement is at least 150 credit hours or five (5) years of undergraduate study for graduation. Awards will only be given and/or continued provided the applicant maintains academic and conduct standards satisfactory to the educational institution attended and to the Fund's Trustees. No post-graduate assistance will be granted. Award recipients must also demonstrate annually their continuing "need" for Fund assistance via the application process.
4. MSF Awards will be given to applicants who have enrolled in a semester for not less than twelve (12) credit hours.
5. An applicant must be the legal dependent child, grandchild or great-grandchild of a military person who served in a 3rd Marine Division (Reinf) unit, and who lost his or her life while so serving as a result of combat actions, during the VIETNAM WAR, those operations known as DESERT STORM, DESERT SHIELD, IRAQI FREEDOM, ENDURING FREEDOM, and any future operations in Southwest Asia, or elsewhere in the rest of the world after the date of August 2, 1990; **or**
6. Be the dependent child, grandchild or great-grandchild of deceased personnel who served in the 3rd Marine Division (Reinf) during combat operations during the VIETNAM WAR or in any 3rd Marine Division (Reinf) unit which served in combat operations during those operations DESERT STORM, DESERT SHIELD, IRAQI FREEDOM, ENDURING FREEDOM, and other Southwest Asia operations, or any in other military operation conducted by order of the President of the United States anywhere throughout the world, and whose post-war

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death has been legally determined by the Department of Veterans Affairs to have been the result of the veteran's service-connected wounds or other disabilities incurred during either of these periods of combat operations; **or**

7. Be the legal dependent child, grandchild or great-grandchild of a deceased regular Annual or regular Life Member of the Association, said deceased Member to have held Association Membership for a period of at least two (2) consecutive years immediately prior to his or her death; **or**
8. Be the legal dependent child, grandchild or great-grandchild of a regular Annual or regular Life Member of the Association, said Member to have held Association Membership for a period of at least two (2) consecutive years immediately prior to receipt of the first application for assistance by the eligible child or grandchild, and who continues his or her membership for the entire period of the dependent's assistance; **and**
9. Shall be unmarried or married and between the ages of sixteen (16) and twenty-three (23), both ages inclusive, as of the date of the original application for assistance; **and**
10. Shall make application for assistance consideration to the Secretary of the Fund's Board of Trustees, such application or applications to be submitted for receipt by the Secretary **no later than April 18, 2018** for Academic Year 2018-2019; **and**
11. Shall demonstrate to the Trustees need for the requested Fund financial assistance, **and**
12. Grade reports shall be submitted to the MSF Secretary after the end of each semester by the student's educational institution (even if the student has graduated) and must be issued directly from the institution. Semester grade reports must be original official documents direct from the educational institution, which includes secure/encrypted emails from the school registrar sent to the MSF Secretary's email. On-line printouts or copies are unacceptable. Grade reports from the educational institution must show the student's name, semester GPA and cumulative GPA.

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