Student Parents on a Mission
Scholarship Application
Checklist

1. Completed Application
2. Proof of Income
   (Financial Aid Award Letter, Check Stub, etc.)
3. Previous semesters transcript
   (a copy from StuInfo is sufficient)
4. A Letter Validating Community Service or letter of reference from current employer or MSU Administrator/Professor
5. A Narrative of Why You are Deserving of the Award
   (no more than 1 page)

For More Information Please Contact
Family Resource Center
(517) 432-3745

Mail to:
Family Resource Center
1407 S. Harrison, Suite 225
E. Lansing, MI 48823
Spring 2014 Semester
Student Parents on a Mission Scholarship

Submit to:
Student Parents on a Mission
c/o Family Resource Center
1407 S. Harrison, Suite 225
East Lansing, MI 48823

Checklist
1. Completed application, submitted by due date: Monday, January 20, 2014
2. Proof of income (financial aid award letter, check stub, etc.)
3. Previous semesters transcript (a copy from StuInfo is sufficient)
4. A letter validating community service or letter of reference from a current employer or MSU Administrator/Professor
5. A narrative of why you are deserving of the award (no more than 1 page)

Application

Name: ____________________________ DOB: ________________
Last          First          MI

Local Address: ____________________ Street __________________ City-State ZIP __________________

Permanent Address: ____________________ Street __________________ City-State ZIP __________________

Local Phone: (___) ___________ Permanent/Cell: __________________


Student Status: Full Time Part Time Other: __________ GPA: ______

Employer: __________________________ Address: __________________________

City/State: ___________ ZIP: _________ Phone: __________________

Position: _________________________________

Source of Income: __________________________ Ethnicity (optional): __________________

Child(s) Name          DOB/Age          School/Childcare
1. ________________________            ____________          __________________________
2. ________________________            ____________          __________________________
3. _________________  __________  ______________

Are you currently receiving any other scholarships/grants? Yes or No. If yes please list:

____________________________________________________________________________________

____________________________________________________________________________________

In what year did you become a member of SPOM? ________________

How many meetings have you attended since membership? ________________

Are your dues current? ☐ Yes    ☐ No

What events have you participated in? ______________________________________________________________________

____________________________________________________________________________________

Community Service Activities/Volunteer     Date     Phone
1. _________________  __________  __________
2. _________________  __________  __________

I ____________________________________________________________________ have answered all of the above information honestly and to the best of my knowledge. If I have falsified any information above I do understand that my application process will be discontinued immediately.

________________________            __________
Signature                       Date

_______________________________
Email Address