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)
6. Deadline: Monday, September 8, 2008 (for Fall 2008 Scholarship)

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
Fall 2008 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, September 8, 2008
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: _______________

Check One

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