2024 Scholarship Application

PLEASE COMPLETE ALL FIELDS

Personal Information

I am a: ☐ New MTNT Foundation Student ☐ Returning MTNT Foundation Student	I am a: ☐ General Scholarship ☐ Full Time ☐ Vocational/Continuing Education ☐ Part Time

Deadline: ☐ (Summer 2024) March 15 ☐ (Fall 2024) July 15 ☐ (Spring 2024) December 16

Full Name:	Date of Birth:
Permanent Mailing Address:	
Phone Number:	E-mail Address:
Address While in School:	
Phone Number While in School:	School E-mail Address:

Eligibility

I am: ☐ An MTNT Shareholder

☐ A descendant of _____, who is an Original Shareholder

Are you related to a current MTNT Board of Director? ☐ Yes ☐ No

If yes, provide the Board member's name and relationship to:_____

Academic Information

Name of School:	Phone Number:
Financial Aid Office Address (Address, City State Zip):	

Have you been accepted?
☐ Yes (Send enrollment verification) ☐ No, Date applied for admission:_____

Current Cumulative GPA:	Field of Study and Degree:	Expected Completion Date:

Have you attended any school since high school?

☐ Yes (If yes, submit most recent official transcripts or certificate of completion)
☐ No (If no, submit official high school transcripts, Diploma or GED)

List all prior postsecondary and/or vocational trainings completed and the school's name:

Release of Information and Responsibility Statement

I hereby attest the information contained in this application is true, correct and complete, and I have read and understood the scholarship guidelines. I,_____, give my permission to MTNT Limited to verify any academic information that is needed to determine my eligibility for funding. I hereby give this permission until revoked in writing by me to: MTNT Limited. I also understand I must reapply for each funding period and I know it is my responsibility to contact the MTNT Foundation to ensure my file is complete by the appropriate deadline.

Student Signature:_____ **Date:**_____