



Michigan Gem and Mineral Society Scholarship Program

www.mgmsrockclub.com

Education Scholarship Application

APPLICANT'S NAME				DATE	
ADDRESS			CITY		STATE ZIP CODE
PHONE NUMBER		High School Name / County			
EMAIL ADDRESS					
PARENT (S) or GUARDIAN (S)			PARENT (S) or GUARDIAN (S)		
ADDRESS			ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
DATE OF GRADUATION	GPA (4.0 scale)		NAME OF COLLEGE OR TECHNICAL SCHOOL YOU PLAN TO ATTEND		
CURRICULUM YOU PLAN TO PURSUE			BEGINNING DATE OF SEMESTER		
HOW DID YOU CHOOSE THIS CURRICULUM?					
LIST ANY ACADEMIC, ARTISTIC, SOCIAL, OR ATHLETIC HONORS RECEIVED					
LIST IN DETAIL COMMUNITY INVOLVEMENT/SERVICE ACTIVITIES (Including school sponsored activity. Use additional paper if necessary)					

LIST ANY COMMUNITY RELATED AWARDS OR HONORS	
LIST ANY SCHOOL SPONSORED EXTRACURRICULAR ACTIVITIES PURSUED DURING HIGH SCHOOL	
LIST ANY JOBS HELD DURING HIGH SCHOOL/COLLEGE. INCLUDE THE EMPLOYER AND YOUR POSITION AND/OR DUTIES	
BRIEF STATEMENT OF FINANCIAL NEED	
IS THERE ANY OTHER INFORMATION ABOUT YOURSELF THAT YOU THINK WILL BE HELPFUL TO THE SELECTION COMMITTEE? (Use additional paper if necessary)	
COUNSELOR'S / PRINCIPAL'S CERTIFICATION:	
TO THE BEST OF MY KNOWLEDGE AND BELIEF, I HEREBY VERIFY THAT THE ACADEMIC INFORMATION AND SUMMARY OF SCHOOL ACTIVITIES AS SUBMITTED IN THIS APPLICATION ARE CORRECT AND THAT THE APPLICANT MEETS THE ELIGIBILITY REQUIREMENTS OUTLINED.	
PRINCIPAL/ COUNSELOR'S SIGNATURE (Required)	DATE
PRINCIPAL/ COUNSELOR'S PRINTED NAME	
STUDENT'S SIGNATURE	DATE