

THE TRANSPORTATION CLUB OF MEMPHIS EDUCATIONAL FOUNDATION SCHOLARSHIP APPLICATION

P. O. Box 751781 Memphis, TN 38175-1781

(Postmark Deadline June 30)

Name: _____
 First Middle Last
Phone: _____
 Cell Home/Other
Address: _____
 Street City State Zip
Student ID# _____ Date of Birth _____

Please **CIRCLE** what best describes your entering:

Semester: Fall - Spring - Summer of the year 20_____, As a: Junior - Senior - Post Grad

Declared Major: _____

Career Objective: _____

Hours anticipated taking during this scholarship year: _____ Spr _____ Fall _____ Sum

University or College you will be attending during this scholarship request:

Name: _____

Address: _____

Projected Graduation Date: _____ Current GPA: _____

How did you hear of our scholarship program? _____

Name(s) of University/College attended:

	Name	City/State	Dates Attended	Grad Date
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

Other: Please list any work experience, internship(s), honors, awards or any other Traffic, Transportation or Logistical experience or information that may apply. Attach a separate sheet if necessary.

1. _____
2. _____
3. _____
4. _____

Please feel free to contact the following Scholarship Committee members if you need further information or assistance:

Larry Mays, 2017-2018 Scholarship Director- lmays9088@bellsouth.net

Robin Colwell, 2017-2018 President, robin.colwell@erau.edu

Jim Deweese, 2015-2016 Vice President - jdeweese@abf.com

***** YOU MUST INCLUDE YOUR MOST RECENT TRANSCRIPT OR REPORT CARD *****

I voluntarily give this information and certify that none of the information provided on this application is false nor have I willingly withheld any pertinent information. Furthermore, if I have knowingly withheld information, the Traffic Club of Memphis Educational Foundation has the right to rescind the scholarship and give the monies to another candidate or place back in the Foundation at the discretion of the Scholarship Committee. I give permission for this information to be given to appropriate committees so that they may recommend eligible recipients. If selected, I authorize my name to be released in the media and I will use this scholarship funds for educational purposes only.

Signature of Applicant

Date: _____