**Military Family Assistance Scholarship Application**

Before the Award can be distributed, **ONE of the following\* below must be provided** to

Butler Community College Registrar’s Office 901South Haverhill Road, El Dorado, KS 67042

**\***Official copy of the final high school transcript

**\***Qualifying scores on the ASSET or COMPASS exam

**\***Official copy of a college transcript with 6 hours of successful college coursework

**\*** Official copy of the GED

I will alsouse **Veterans Educational Benefits,** **MyCAA,** or any **third party payment program** or **Scholarship** that pays for tuition costs, such as an Athletic or Activity Scholarship during this MFAS scholarship semester. **YES NO**

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\* I have read the above information and agree to comply with the scholarship eligibility requirements here and

with those on the MFAS cover sheet listed on the reverse side of this application sheet.

Date Semester \_\_\_\_\_\_\_\_\_\_\_\_\_ Butler ID No: @\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a current High School Student? YES NO

Name Birthday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First

Address \_\_\_\_\_\_\_

Street City/State Zip

Phone \_\_\_(Home) Phone \_\_\_(Work) or (Cell)

What are your educational goals and objectives? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How would the Scholarship help you accomplish your educational goals and objectives? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_

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**Sponsor Information (Must Circle One)**

**Active Duty or Full Time (40 Hrs a week) Guard or Reserves or Military Retiree**

Sponsor Name \_\_\_\_\_\_\_\_ Last 4 Digits of SS No: \_\_\_\_\_\_\_\_\_\_\_\_

Last First

Rank Squadron \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (Home) Phone (Work)

Current MILITARY I.D.? \_\_\_\_\_\_\_

Exp Date \_\_\_\_\_\_\_\_

Verified by (Butler Personnel): \_\_\_\_\_\_

**===================================================================================**

**(3-27-2014) OFFICE USE ONLY Advisor**: \_\_\_\_\_\_\_\_\_\_\_\_\_

**MFAS (awards) Report:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Hours** **enrolled** \_\_\_\_\_\_\_\_ **Hours Awarded** \_\_\_\_\_\_\_\_\_ **Award Semester** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Waiver and CTE Courses\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_