



Application Form for Marr-Anderson Family Foundation Scholarships for Graduate Education

These scholarships are available to college graduates who are citizens or legal permanent residents of the United States and who wish to pursue graduate degrees in the fields of business, education and medicine. Recipients will be selected in an objective and nondiscriminatory manner, and the Marr-Anderson Family Foundation will not discriminate on the basis of race, color, nationality, religion, ethnicity or gender. No individual who is a relative by blood or marriage of anyone on the Marr-Anderson Family Foundation's Grants Committee is eligible to receive an award. No employee of the Marr-Anderson Family Foundation or member of such employee's family is eligible to receive an award. No disqualified person with respect to the Marr-Anderson Family Foundation is eligible to receive an award.

In connection with this application, the following is required:

- GMATS or MCAT scores;
- Personal interview;
- Resume';
- Essay;
- Recommendations- 2 required, one personal and one work/school;
- Proof of income and asset levels for both the applicant and, if the applicant is under the age of 23 years, the applicant's parents/guardians.

General Instructions to Applicant

1. Complete and return an application to Marr-Anderson Family Foundation, P.O. Box 6039, Falmouth, Maine 04105 by February 28, 2021. Late applications will not be considered.
2. Recommendations must be enclosed in a sealed envelope with the signature of the person making the recommendation over the flap of the envelope. Recommendations will not be disclosed to applicants by the Marr-Anderson Family Foundation. If you would like a copy of your recommendation, please ask the person making the recommendation to provide you with a copy.
3. After your application and references have been received, you may be contacted by the Foundation for a personal interview with a member of the Grants Committee. Please be sure that we have accurate contact information for this purpose.
4. Failure to complete any portion of the application greatly reduces your chance of being awarded a scholarship.

APPLICATION

1. Personal Information

Full name of applicant _____
Home telephone number _____ Email address _____
Present home address _____
City _____ State _____ Zip _____
Citizenship _____ Country of Legal Residency: _____
Date of birth _____ Social Security Number _____

2. Family Information

Parent/Guardian 1 _____ Parent/Guardian 2 _____
Occupation _____ Occupation _____
Street address _____ Street address _____
City,St.,Zip _____ City,St.,Zip _____
Phone number _____ Phone number _____

Attach additional sheets if you have more than 2 parents/guardians.

Name and ages of siblings/other dependents. Indicate what school(s) they attend.

Name	Relationship	Age	School or college/years attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Education

a. Name all colleges and/or technical schools you have attended. List the school you are presently attending first.

b. How many years do you plan to spend on post-collegiate education and what course of study would you like to pursue?

c. What educational institutions are you most like to attend for graduate school?

d. To which educational institutions have you applied to for admission for graduate school? Please indicate acceptance status.

e. List scholarships, grants or loans for which you have applied, and note the amounts you expect to receive.

Name **Amount**

4. Academic, athletic, service, and extra activities. Use additional pages or attach resume' for sections 4a, 4b, and 4c.

a. List academic awards, achievements and dates.

b. List participation in athletic activities.

c. List participation in community service and extra-curricular activities.

5. Employment History

Please attach a resume' detailing your work experience.

6. Your Expected Cost of Graduate Education:

Please provide the following information for each educational institution you are applying to.

	Name _____	Name _____	Name _____	Name _____
<i>Tuition</i>				
<i>Room/board</i>				
<i>Books/supplies</i>				
<i>Clothing/personal</i>				
<i>Entertainment</i>				
<i>Transportation</i>				
<i>Scholarship/ financial aid awarded</i>				
Total Net Annual Cost				

7. Financial Need Summary

Complete this section regarding Estimated Combined Net Income of if you are under the age of 23 years, your parent(s) or guardian(s) for the current year. Please include copies of your and your parent's/guardian's most recent Federal Income Tax returns (Forms 1040). In addition, please list your/your parent's/your guardian's total net worth, including all assets and liabilities. Attach additional sheets if necessary.

	Parent/Guardian 1: _____	Parent/Guardian 2: _____
<i>Income and Year</i>		
<i>Real Estate Investments (including current residence and equity in current residence)</i>		
<i>Financial Investments</i>		
<i>Retirement Savings (Include IRA, ROTH, 401K)</i>		
<i>Additional Assets</i>		
<i>Liabilities</i>		
Total Net Worth		

b. Have you filed a FAFSA (Free Application for Federal Student Aid)? If so, please submit a returned copy showing your EFC (expected family contribution).

c. Describe any special circumstances such as medical conditions, disabilities, etc. that may affect your ability to pay for your graduate school tuition. Use additional pages if necessary.

8. Essay

Please submit a short essay of no more than 150 words answering:

What future business or educational career will you likely pursue after finishing your graduate studies and why?

Please submit an essay of no more than 300 words answering:

Some believe that a person of character demonstrates the following six qualities: trustworthiness, respect, responsibility, fairness, caring, and citizenship. Pick one of these qualities, describe the value of the quality, and, most importantly, explain how you have exemplified this trait.

9. Transcript History

Attach a certified transcript of the student's college record to this sheet. If you attended more than one undergraduate institution, please attach a certified transcript from each institution which you attended.

GPA: _____ on a 4.0 scale (please convert to a 4.0 scale if GPA is measured on a different scale)

Best GMAT Score: _____

Best MCAT Score: _____

I do state the above information is accurate to the best of my knowledge.

The Applicant has completed this application ("Application") for a Scholarship ("Scholarship") grant from the Marr-Anderson Family Foundation ("Foundation"), which includes the terms and conditions of the Scholarship. The Applicant understands that by submitting that Application, and signing the Application herein that he/she is agreeing to the terms and conditions of the Scholarship outlined below:

- The Scholarship funds may only be used for the payment of "qualified educational expenses" as defined in the Internal Revenue Code of 1986, as may be amended from time to time. These include tuition, fees, and course related equipment and books.
- The Scholarship will be payable directly to the educational institution that the Applicant plans to attend, and may only be applied by the educational institution for the qualified educational expenses of the Applicant if the Applicant is enrolled in the educational institution at the time and the Applicant is in good standing at such educational institution. Whether or not the Applicant is "in good standing" will be determined by the educational institution in its sole discretion and not by the Foundation.

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- **The Foundation is not liable for any payments withheld by the educational institution of such Scholarship funds.**
 - **Failure of the Applicant to enroll in an educational institution within two years from the date that the Foundation issues an award letter to the Applicant shall result in forfeiture of the Scholarship.**
 - **If the educational institution (for any reason including the failure of Applicant to remain in good standing) is unable to apply all of the Scholarship funds for the benefit of the Applicant within 5 years from the date that such funds are received by the educational institution, the Applicant shall forfeit such Scholarship funds (or the balance of such Scholarship funds).**
 - **In the event Applicant suffers total and permanent disability or death, the Applicant shall forfeit the Scholarship funds (or the balance of such Scholarship funds) that have not been applied by the educational institution for the benefit of the Applicant.**
 - **Applicant understands, acknowledges and agrees that the Foundation is required by law to disclose the Applicant's name, address and the amount of any funds paid to Applicant or on Applicant's behalf by the Foundation and the purpose of the Scholarship on the Foundation's tax return which is filed with the U.S. Internal Revenue Service and that, as a result, this information will become public.**
 - **Applicant understands that Applicant must submit a report, at least annually, as well as on completion of the Scholarship funding, to the Foundation regarding the use and application of the Scholarship funds. Applicant agrees to provide the foundation with an annual report and to report to the Foundation upon completion of the Scholarship funding. The report provided to the Foundation will include a detailed accounting of all funds awarded under the Scholarship.**

Signature of Applicant _____

Date _____