## Scholarship Application North Carolina Movers Association

I am applying for the \$1,000 award for a student attending a 4-year school.		
I am applying f	or the \$500 award for a student attending a 2-year school or CDL cou	ırse.
Name		
Age/Birthdate		
Address		
E-mail address		
Home Phone	<del></del>	
	T OF FUNDS AVAILABLE FOR YEAR IN WHICH SCHOLARSHIP IS ant is not a dependent of his parents, do not include parental contribution)	
Parents \$	Savings \$	
Scholarships \$ Own Income \$	Other Income \$	
IDENTIFICATION OF IN	NDIVIDUAL(s) PROVIDING ASSISTANCE	
Name(s)	Relationship	
PLACE OF EMPLOYME	ENT AND POSITION	
Father		
Mother		
Self		
Guardian/Relative		
HIGH SCHOOL OR INS	TITUTION APPLICANT IS NOW ATTENDING OR GRADUATED FROM	
Exact School		
Address and Phone Number		
Principal or Guidance Counselor		
Graduation Date	GPA	_
EDUCATIONAL INSTIT University or College to Attend	UTION IN WHICH ENROLLMENT IS DESIRED OR PRESENTLY ATTENI	DING

Course of Study	
E	
College Costs per School Year \$	
Parent/Guardian	· · · · · · · · · · · · · · · · · · ·
Relation to Applicant	
Parent's/Guardian's Position at Sponsoring Company	
Sponsoring Moving Company	
	HIP PROCEDURES FOR OTHER REQUIREMENTS.  this application is true to the best of our knowledge and
submit this information for consideration of	the North Carolina Movers Association Scholarship award.
Applicant Signature	Parent/Guardian Signature
High School Principal/Guidance Counselor Or Student Advisor	Moving Company Officer (requires witness)
Date Application Mailed	Witness