



Marshall Community Foundation<sup>SM</sup>

*Working Together for Our Future*

## FRATERNAL ORDER OF POLICE WAYNE B. FITCH LODGE 138 SCHOLARSHIP

The dedicated and committed members of the Fraternal Order of Police- Wayne B. Fitch Lodge 138 have established a scholarship with the intention to assist high school graduates in enhancing their futures through growth and education.

The Fraternal Order of Police Wayne B. Fitch Lodge 138 Scholarship is awarded to a graduating senior residing in Calhoun County who is pursuing a career in Law Enforcement or as a Corrections Officer. Applicants must demonstrate a financial need and be accepted to a Michigan College or University with an accredited Law Enforcement Program. GPA is not a determining factor.

Contact: High School Guidance Office or Marshall Community Foundation 269.781.2273, e-mail: [info@marshallcf.org](mailto:info@marshallcf.org), website: [www.marshallcf.org](http://www.marshallcf.org)

**Students must complete the 4-page application for scholarships administered by the Marshall Community Foundation. This Application can be downloaded from the Scholarship page at the Foundation website, [www.marshallcf.org](http://www.marshallcf.org), or contact the Foundation Office at 269.781.2273 or [info@marshallcf.org](mailto:info@marshallcf.org)**

Essay Questions: Please provide a one-page type written response to the following questions on a separate page, recording your name in the upper right hand corner.

1. What is the importance of community service and in what way have you contributed to community service?

Recommendation Letter: Two required- one from a high school administrator/educator and one from an adult member of the community (not a family member).

Financial Aid: Please complete the attached financial aid form and return with application.

GPA: GPA is not a qualifying factor, but transcripts and scores are requested.

**Return completed application, including recommendation letter, essay question, and any other qualifying criteria to:**

**Marshall Community Foundation  
614 Homer Road  
Marshall, MI 49068**

**Applications must be delivered or postmarked by March 1.**



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**Financial Information to accompany Scholarship Application**

**CONFIDENTIAL**

Person providing financial information: \_\_\_\_\_  
Name Address

Relation to applicant: \_\_\_\_\_ Total number of exemptions claimed: \_\_\_\_\_

**PARENT(S)**

**Adjusted gross income**

(Can be found: Line 37 of Form 1040 or Line 21 of Form 1040A or Line 4 of Form 1040EZ): \$ \_\_\_\_\_

**Federal, State & Local taxes paid:**

Income Tax \$ \_\_\_\_\_

Real Estate Tax \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

**Social Security Benefits:**

\$ \_\_\_\_\_

**State or Federal Assistance (FIA, FID, etc.)**

\$ \_\_\_\_\_

**Other untaxed income:**

Child Support \$ \_\_\_\_\_

Inheritance \$ \_\_\_\_\_

Workmen's Comp \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

**Asset information:**

Cash Savings \$ \_\_\_\_\_

Stocks & Bonds \$ \_\_\_\_\_

Other Real Estate/Investment \$ \_\_\_\_\_

**Other Real Estate/Investment Debt:**

\$ \_\_\_\_\_

**Business/Farm Value:**

\$ \_\_\_\_\_

**Business/Farm Debt:**

\$ \_\_\_\_\_

**Other Debts/Describe:**

Credit Cards \$ \_\_\_\_\_

Car Loan \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_



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**List below dependent children. Indicate if attending School or College.**  
(List student applicant first)

<b>Name</b>	<b>Age</b>	<b>Name of School</b>	<b>Private/Public</b>
<b>Grade</b>			
_____	_____	_____	____/____
_____	_____	_____	____/____
_____	_____	_____	____/____
_____	_____	_____	____/____
_____	_____	_____	____/____

Total amount expended for college/private schooling (tuition/room & board) for dependent children in current year.

Do not include room and/or board for students living at home: \_\_\_\_\_

**Please list any unusual financial circumstances or financial hardships in your household:**  
(Attach additional sheets if needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned hereby acknowledges that the information provided on this application, including attachments, is true and correct to the best of their knowledge. The undersigned consents that this information may be provided and disclosed to the Marshall Community Foundation, to the Foundation Trustees/Officers, and to any other person authorized by the Foundation to review the information. Verification may be obtained from any source. Also, we hereby release from liability any person submitting information to the Foundation for use in the selection of scholarship recipients.

Original signatures required

\_\_\_\_\_  
Signature of Student Applicant\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\*The student applicant is required to sign this application. The parent(s) must also sign if the student applicant is under 18 years of age and/or was claimed as an exemption.