

## ***FORT STREET CAR CLASSICS***

To: High School Guidance Counselor and Students enrolled in post-secondary automotive programs for **2020-2021** School Year.

From: ***Fort Street Car Classics Car Club***  
Attn: John Jutte  
PO Box 285  
Fort Recovery, Ohio 45846  
(419) 852-2765

Re: **\$500 Scholarship for Automotive Education**

Fort Street Car Classics has established a scholarship program for students who continue their post-secondary education in an automotive field. Students must be current seniors or already enrolled in a post-secondary program and a resident of Mercer County, Ohio or Jay County, Indiana to be eligible.

The Scholarship will be in the amount of \$500 payable to the student. This award is a gift to the recipient, contingent upon the completion of the planned educational program. If the recipient fails to complete the program, the award maybe considered a loan, and must be repaid to Fort Street Car Classics within twelve (12) months. If there is an interruption in the educational program, an evaluation of the circumstances will be made, and the final decision of the gift/loan status will be made exclusively by the Fort Street Car Classics.

Students agreeing to the stipulations of this scholarship should send the Vocational Automotive Application to the above referenced name and address no later than **April 10, 2020**.

**FORT STREET CAR CLASSICS**

**VOCATIONAL AUTOMOTIVE SCHOLARSHIP APPLICATION**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

SCHOOL(S) PRESENTLY ATTENDING \_\_\_\_\_

GRADE POINT AVERAGE: \_\_\_\_\_

ACTIVITIES IN HIGH SCHOOL (If necessary, attach additional pages): \_\_\_\_\_

CAREER PLANS: \_\_\_\_\_

WHY HAVE YOU CHOSEN THE CAREER STATED? \_\_\_\_\_

(add additional pages if necessary)

VOCATIONAL SCHOOL ACCEPTED AND/OR PLAN TO ATTEND:

LIST ALL PLACES OF EMPLOYMENT DURING HIGH SCHOOL AND INCLUDE HOURS WORKED PER WEEK. ALSO INCLUDE ANY VOLUNTEER WORK YOU MAY HAVE DONE:

NUMBER OF YEARS/MONTHS TO COMPLETE PROGRAM IN THE SCHOOL CHOSEN:

(Scholarship money shall be sent directly to the recipient to be used only for tuition. The recipient's name will be on the check and they are invited to attend one meeting or our May Cruise-in.)

**ATTACH THE FOLLOWING TO THIS APPLICATION**

1. Recommendations by High School faculty members. Minimum of two (2)

2. Two Character references:

Name	Position	Address	Phone	Relationship
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3. Recent Photograph

4. Signature of Counselor: \_\_\_\_\_