Morgan A. Gilbert Memorial Fund

presents

The Grease Monkey and Gear Head Scholarship

PLEASE TYPE OR PRINT CLEARLY

PERSONAL

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

PARENT 1 NAME: _____ PARENT 1 OCCUPATION: _____

PARENT 2 NAME: _____ PARENT 2 OCCUPATION: _____

EDUCATION

YEARS ATTENDED HIGH SCHOOL: _____

YEARS IN AUTOMOTIVE PROGRAM: _____

GRADUATION DATE: _____ GRADE POINT AVERAGE: _____

EXTRA-CURRICULAR ACTIVITIES: _____

HOBBIES: _____

INTERNSHIPS, JOBS, STATE AUTO TECHNICIAN COMPETITIONS

_____

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_____

EDUCATIONAL AND PROFESSIONAL GOALS (attach additional sheets, if needed)

WHY ARE YOU PASSIONATE ABOUT AN AUTOMOTIVE/DIESEL TRADE EDUCATION (attach additional sheets, if needed)

APPLICANT SIGNATURE

DATE

PRINT NAME

Please include your High School transcript and TWO letters of recommendation and return to:
Attn: Scott or Rue
Morgan A. Gilbert Memorial Fund
450 Jordan Road Ste. H, Sedona AZ 86336.

DUE DATE APRIL 15th of the application year