The Montana Independent Automobile Dealers Association (MTIADA) invites you as an eligible student to complete this application in pursuit of scholarship funds to be paid to the college of your choice in the fall of 2017. Applications must be POSTMARKED NO LATER THAN March 18, 2017 AND RECEIVED NO LATER THAN March 31, 2017.

Eligibility Criteria:

You must

(1.) Be classified as a high school senior during the current 2016-17 school year or currently enrolled in a college, university or trade school and be a legal resident of Montana.

(2.) Be the child of a car dealer or the child of a dealer's employee that is currently a member in good standing of the MTIADA.

(3.) Have maintained an outstanding academic achievement record as reflected by an official high school transcript and

(4.) Demonstrate an aptitude for college work as measured by SAT or ACT scores.

Application Process:

Submit the completed application form with the required attachments in a 10 inch x 13 inch envelope, with adequate postage to:

MTIADA
Scholarship Selection Committee
PO Box 80326
Billings, MT 59108

All information MUST be included with the original application. No additional information will be accepted at a later date.

Staff will review the applications for completeness and will forward them to the Scholarship Selection Committee within MTIADA. Two applicants will be selected based on the merit of
his/her scholarship application and will be notified by the MTIADA no later than mid-May 2017. If the scholarship recipient does not use the scholarship within two years the scholarship may be withdrawn.

Scholarship Application Form

2016-2017

Please type or print legibly.

Name (first, middle, last)
________________________________________________________

Home Address
_________________________________________________________________

City
______________________________________State______Zip________________

Telephone_________________________________Fax______________________

Email______________________________________________________________

Name of Parents or Guardian
_____________________________________________________

Address___________________________________________________________
City______________________________State____ Zip__________
Name of dealership that is a member of
MTIADA__________________________
Name of High School_____________________________________________________________
Address__________________________City____________State_____Zip____
Dates of attendance and graduation
___________________________________________________________________
Other high schools attended if applicable (names and addresses)
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Please provide the following information. Additional pages may be attached as necessary.
Extracurricular activities, offices and accomplishments

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Awards and Distinctions

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Community Involvement

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Employment History

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Career Goals

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
Universities/Colleges to which you are applying for admission

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

_______________________________________________________________

___________________________________________________________________

_____________________

Hometown

newspaper_________________________________________________________

___________

Newspaper website or mailing

address_________________________________________________________

___________________________________________________________________

On a separate sheet of paper, tell us about yourself and your family’s involvement in the automobile industry.

ADDITIONAL REQUIRED ATTACHMENTS

1. Official high school transcript

2. SAT or ACT Scores Report - may be included on the transcript
3. Letter(s) of recommendation (no more than 5) from high school counselor, principal, teacher, employer, etc.

I, as the scholarship applicant, certify that the enclosed information is correct to the best of my knowledge. I hereby grant the Montana Independent Automobile Dealers Association permission to release this information, including the required attachments, to the Scholarship Selection Committee.

_______________________________

__________________

Signature

Date