

## The VMCCA Foundation Scholarship Application

1. This scholarship will benefit any Active Member of the Vintage Motor Car Club of America.
2. The applicant must be the child, grandchild or great-grandchild of an active member of the VMCCA prior to the date of this application. Membership will be confirmed by the National Secretary.
3. Applicants from previous years may re-apply, but winning applicants will receive only one scholarship award.
4. The scholarship award may be used at any accredited school or vocational school of the recipient's choice.
5. Full and part time students are eligible for scholarship assistance.
6. Applicants must obtain a 2.5 GPA average on a 4.0 scale for the year preceding their request for a scholarship.
7. Recipients must use the scholarship for the current school year. The award cannot be deferred.
8. The amount of the scholarship will be determined by the Board of Directors and may vary depending on contributions. Please advise Foundation if you have full scholarship offers from other sources.
9. Scholarship funds will be paid directly to accredited school of recipient's choice.
10. Applicants must submit copies of all their academic transcripts with their application.
- 11. Applications are accepted year-round.**
12. Evaluation of the answers submitted and Grade Point Average will be used to determine applicant's eligibility to receive scholarship award.
13. Proof of enrollment of a school or college may be required.
14. Decisions made by the scholarship committee are final.
15. Award winning candidates will be notified via email.
16. Please submit electronically two pictures: one of yourself and one of you and your parents or grandparents. This will be used for the Bulb Horn Magazine and the VMCCA Foundation website.
17. Mail completed application to: VMCCA Foundation, P. O. Box 161, Hempstead, TX 77445. E-mailed applications WILL NOT be accepted. Submitted applications will receive a confirmation letter via US mail.

Student Name \_\_\_\_\_ GPA for the prior school year \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Parent(s) or Grandparent(s) Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

VMCCA Region \_\_\_\_\_ VMCCA Chapter (if applicable) \_\_\_\_\_ Years associated \_\_\_\_\_

Name and address of the school at which the scholarship will be used \_\_\_\_\_

Explain in your own words how you intend to use the scholarship and why you believe you should be the recipient. Attach additional pages if needed.

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Signature \_\_\_\_\_ Date of Application \_\_\_\_\_

**COMPLETED APPLICATIONS MUST BE MAILED TO:** VMCCA Foundation, P.O. Box 161, Hempstead, TX 77445