Application for Foundation Scholarships

Drivers, dock workers, mechanics, office personnel - they are among the thousands of people each day who contribute to a strong, efficient motor transportation industry in Kansas.

Many of these individuals are pursuing studies toward a higher education. The Kansas Motor Carriers Association Foundation would like to help some of these students in their efforts by providing scholarships to those seeking higher education (college, community college, vocational/technical training) in a transportation related field.

Scholarship recipients will be selected based on their academic achievement, community involvement and financial need. The Foundation will provide financial assistance for college and trade school students. Scholarships may be used to meet such expenses as tuition, books, and housing.

The KMCA Foundation is a non-profit educational, public relations, research and community service organization created by the Kansas Motor Carriers Association to promote the trucking industry to the people of Kansas. KMCA represents more than 900 truck lines and allied industries operating in Kansas.

Eligibility: Applicants must be high school graduates or seniors. They must also be attending school full-time, 12-hours per semester at a college, community college, or vocational college in Kansas. Applicants, including previous KMCA Foundation Scholarship recipients may apply each qualifying year.

Application: A student seeking a scholarship should complete the attached application form and send it to the KMCA Foundation along with a recent professional photograph (photocopies will not be accepted) with your name and current year on the reverse side, a certified copy of your year-end transcript, one to three letters of recommendation and an accompanying letter of intent. This letter should include information on current and planned studies, career goals, interests, and the reason for applying for the scholarship. A checklist is provided at the bottom of the application.

Deadline: Applications must be received by close of business May 3, 2019 for consideration in scholarships for the 2019-2020 academic year. There will be NO EXCEPTIONS. It is the applicant's responsibility to complete all requirements. Incomplete applications will not be processed. Applications will not be permitted by fax or e-mail.

Selection: The Board of Trustees is comprised of five members of KMCA. Scholarship recipients will be chosen by the Board of Trustees of the Kansas Motor Carriers Association Foundation and the scholarship funds will be sent directly to the recipient's school. Scholarship funds are mailed directly to the school listed on the application in early August after verification of full-time enrollment. Funds will be equally divided between the Fall and Spring semester of the awarded school year.

Notification: Each applicant will receive a notification letter by mid-August. Please refrain from calling the Foundation for status unless you have not received a notification by mid-August.

Please contact the KMCA office at 785-267-1641 with any questions.

2019 KMCA Foundation Scholarship Application

A scholarship from the Kansas Motor Carriers Association Foundation will be awarded in consideration of an applicant's academic achievements, community involvement and financial need. It is awarded for one year in an amount determined by the Foundation. It is valid for the academic year it is awarded and cannot be held over without the approval of the Board of Trustees.

1. Personal Data			
Name	Social S	ecurity Numbe	er
Permanent mailing address			
City	State		Zip
Telephone Number	E-Mail Address		
Date of Birth	_AgeSingleMa	rriedNo	. Of Dependents
Your affiliation with the transportat	ion industry: If other than you	urself, are you	a dependent?
Relative's name:	Relationship	o to Student: _	
KMCA Member Company (if application)	ble):		
Supervisor's Name:			
Supervisor's Phone:	ext		_
2. School History			
High School		City:	
Year of High School Graduation	Cumulative GPA	_on a	scale
ACT Scoreand/or SAT S	Score		
Name of College or University			
Years of College Completed	_Grade Point Average	on a	_scale (if applicable).
Major:	Minor (if applicable):		

Activities, Awards and Honors (List on Separate sheet.)

Should you be awarded a scholarship, please provide all college/university/trade school contact information where the funds should be sent:							
University:							
Address:							
City:	State:	Zip:		Phone			
Check if applicable:Trac	de School	Corresp	ondence	Online			
Other (please specify)							
3. Additional Information							
Hobbies and recreational inter-	ests:						
Have you ever been convicted	of a legal viola	ation?	_If yes, pleas	e explair	n on a separate page.		
Applicant's employment record	d: (list most re	cent employ	ver first)				
Date Company Nam	е	City	Super	visor	Applicant's position		
Applicant's income last year:_		Spouse'	s income (if a	pplicable	e)		
If you are a dependent, list yo	ur:						
Father's Name			Occupatio	on:			
Father's address							
Mother's Name			Occupatio	n:			
Mother's address							
Number of dependents other t	han applicant l	living in the	home:				
Estimated annual family incom	ne		_				
Estimated annual family incom	ne from non-cu	ıstodial pare	nt, if applicab	ole:			
Other financial resources, asse	ets and savings	s your family	y may have in	additio	n to their yearly income		
List the type and amount of ar	ny other financ	ial aid you a	are receiving:				

CHECKLIST

Completed Application
Letter of Intent
Official Year End Transcript
1 to 3 letters of recommendation
Recent professional photograph

Mail completed application to: KMCA Foundation P.O. Box 1673 Topeka, KS, 66601

Questions? Please call (785) 267-1641