



2020 North Kansas City Schools Parent/Guardian and Youth Scholarship Program and Application

Extended Deadline to Submit a Scholarship Application:

Postmarked or Emailed by February 28, 2020

Scholarships will be awarded by: April 15, 2020

GP M.A.D.E. Foundation, Inc. | P.O. Box 665 | Columbia, MO 65205 |
foundation@gpmade.com

MISSION:

MAKING A DIFFERENCE EVERY-DAY in the life and future of youth facing difficult challenges.

Eligibility

To be eligible for this **\$2,000 scholarship**, which is renewable, an individual must:

- 1) Show a financial need.
- 2) Possess the motivation to succeed.
- 3) Be of good character.
- 4) Be under the age of 20 and a Missouri resident.
- 5) Attend North Kansas City, Oak Park, Staley or Winnetonka High Schools.
- 6) Plan to attend **a college, university or trade school in the state of Missouri.**

Selection

Scholarship recipients – known as GP M.A.D.E. Scholars – are selected each year by the Scholarship Committee of the Foundation. Recipients will be chosen based on the first three criteria listed under Eligibility. All applicants will receive notification of the outcome of their scholarship application.

Award Amounts

The GP M.A.D.E. Foundation Scholarship awards are determined by the amount the Scholarship Committee recommends is prudent to be awarded.

Application Package

Consideration will be given to candidates submitting complete application packages, which include:

1. A complete GP M.A.D.E. application form (copies are acceptable).
2. Proof of United States citizenship. (birth certificate, passport or naturalization certificate)
3. Official high school transcript.

On a separate sheet of paper/document:

1. **Please share your need based on one of the first three GP M.A.D.E. Foundation Eligibility criteria: financial need, motivation to succeed or good character.**
2. **Include a personal profile of introduction, goals, motivation and why you feel you should receive the scholarship.**
3. **You may submit other material, which you consider relevant.**

Note: Please place your name on each sheet of paper.

Applications and attachments may be mailed (postmarked by the application deadline) or emailed (by the application deadline) to:

- **By Mail**
GP M.A.D.E. Foundation, Inc.
Attention: Scholarship Committee
P.O. Box 665
Columbia, MO 65201

OR

- **By Email**
foundation@gpmade.com

Interviews

The GP M.A.D.E. scholarship committee may require an interview with the applicant(s). If needed, applicant(s) will be notified by telephone, email, or letter regarding their interview date and time. All interviews shall be completed prior to the deadline of the award date for the application year.

Renewing Scholarship Eligibility

The GP M.A.D.E. scholarship committee will consider renewing a scholarship for up to four years if the Scholar maintains a minimum 2.0 GPA, passes all classes and is considered a student in good standing. The Scholar is asked to write the Foundation making such a request detailing how they still meet the three Eligibility criteria and how the continued scholarship will benefit them.

Scholarship Awarding Procedure and Payments

The scholarship must be used in the state of Missouri for a higher education program, at a trade school or at a university. The Foundation will notify the applicant of their award as soon after April 1st as possible. The check will be made payable to the school chosen by the applicant. Any taxes that may be due are entirely the responsibility of the recipient Scholar. Please consult your tax adviser to determine your tax treatment.

Loss of Renewable Scholarship

Scholar shall not be eligible to renew his or her scholarship if:

1. Individual is no longer a citizen or permanent resident of the United States
2. Scholar no longer meets the three Eligibility criteria as determined by the Scholarship Committee.
3. Scholar no longer maintains a minimum GPA of 2.0 or has failed a class.
4. Scholar is no longer considered a student in good standing.

Change of Contact Information

If there is a change of name, address, telephone number, cell phone number or email address – the applicant and/or scholar must immediately notify the Foundation by email at foundation@gpmade.com.

Summary Report by Scholarship Recipient

The scholarship recipient is required to provide in writing a brief summary of the impact of their award, stating how the financial reward has made a difference in their life every day. This summary should be sent to the Foundation no later than December 31, 2020. This summary should be sent to:

E-mail: foundation@gpmade.com **OR** Mailing Address: GP M.A.D.E. Foundation, Inc.
Attention: Scholarship Committee
P.O. Box 665
Columbia, MO 65201

Please include complete name and contact information.

Applicant Certification

By applying and accepting a scholarship, you have agreed to the below statements by signing the application form in the certification section:

- I certify the information provided on the application and all supporting documentation submitted at any time is true, correct and complete to the best of my knowledge.
- I understand that if I give information that is not true or if I withhold information and I receive a scholarship for which I am not eligible, the scholarship will be denied or revoked.
- I have submitted a completed GP M.A.D.E. Foundation application form (copies are acceptable).
- I have attached sheets, as needed, with additional information. My name appears on all sheets/attachments.
- I will provide a “Summary” report within six months or by December 31, 2020.

GP M.A.D.E. Foundation, Inc. 2020 Scholarship Application
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Last Name	First Name		M.I.
Street Address	City	State	Zip
Email Address			
Cell Phone #		Other Phone #	
I am a citizen of the United States		Yes	No
High School:			
Type of Application (College/University OR Trade School):			

Parent(s)/Guardian (required if applicant is a minor)

Father's Name	
Address	
Cell or Home Phone and Email Address	
Mother's Name	
Address	
Cell or Home Phone and Email Address	

OR

Guardian Name	
Address	
Cell or Home Phone and Email Address	
Guardian's Relationship to Applicant	

2020 Scholarship Application Continued

Reference and/or Sponsor

Please provide the names, addresses, telephone numbers and email address of two references or two sponsors, other than members of your family.

1st Reference or Sponsor Name/Contact	
Address	
Cell or Home Phone and Email Address	

2nd Reference or Sponsor Name/Contact	
Address	
Cell or Home Phone and Email Address	

Certification

I hereby state that the information contained in this application is true and correct to the best of my knowledge.

Applicant's Signature		Date	
Signature of Parent(s)/Guardian(s)		Date	

Photo Release and Consent Form

I hereby consent to the use of my photographic image and/or name by the GP M.A.D.E. Foundation, Inc. in any printed form or on any website or social media application of the Foundation. I further that the Foundation is free to select, crop, or otherwise alter any photographs or videos without prior consultation with me.

I understand that I am donating and assigning all copyrights or other intellectual property rights to such photographic images or videos, and that there will be no payment or compensation for the photographs, videos, or their use. In giving my consent, I agree that I shall not bring or file any complaints, claims, or causes of action of any kind against, and release, the GP M.A.D.E. Foundation, Inc. for any matter in connection with the use of my photographs, videos, and name.

Print Full Legal Name	
Legal Signature	
Signature(s) of Parent/Guardian*	
Date by Parent(s)/Guardian(s)	

* Signature by Parent(s)/Guardian(s) is required if applicant is a minor.