

Military Family Assistance Scholarship Application

Before the Award can be distributed, **ONE of the following* below must be provided** to Butler Community College Registrar's Office 901 South Haverhill Road, El Dorado, KS 67042

- *Official copy of the final high school transcript
- *Qualifying scores on the ASSET or COMPASS exam
- *Official copy of a college transcript with 6 hours of successful college coursework
- * Official copy of the GED

Please mark **YES** or **NO** to the statement below:

I will also use **Veterans Educational Benefits, MyCAA**, or any **third party payment program** or **Scholarship** that pays for tuition costs, such as an Athletic or Activity Scholarship during this MFAS scholarship semester.

Student Signature: _____

* I have read the above information and agree to comply with the scholarship eligibility requirements here and with those listed on the MFAS webpage.

Date _____ Semester _____ Butler ID No: _____

Name _____ Birthday _____
Last First

Address _____
Street City/State Zip

Phone _____ (Home) Phone _____ (Work) or (Cell)

Academic Background

Colleges attended and dates (Semester and Years) _____

What are your educational goals and objectives? _____

How would the Scholarship help you accomplish your educational goals and objectives?

Sponsor Information (Must Circle One)

Active Duty or **Full Time (40 Hrs a week)** **Guard or Reserves** or **Military Retiree**

Sponsor Name _____ Last 4 Digits of SS No: _____
Last First

Address _____
Street City/State Zip

Phone _____ (Home) Male _____ Female _____

Phone _____ (Work) Rank _____ Squadron _____

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(3-27-2014)

OFFICE USE ONLY

Advisor: _____

MFAS Report: _____

Number of **Hours enrolled** and **Hours Awarded** for the **MFAS Award Semester**: HE = HA =

MFAS Award Semester: _____ Date: _____

Current MILITARY I.D.? _____

Verified by (Butler Personnel): _____