## OCMA PAUL A. COREY SCHOLARSHIP APPLICATION



## OHIO COIN MACHINE ASSOCIATION

Please print or type all information requested in this application. You may attach additional sheets if more space is needed.

You are required to submit this application, letters of personal reference from two (2) persons unrelated to you and a transcript of your school records. These items should be sent to:

OCMA – Paul A. Corey Scholarship Fund c/o OCMA 3757 Indianola Ave. Columbus, OH 43214-3753

We must receive your application by: May 31

## STUDENT'S INCOME & EXPENSES FOR ONE SCHOOL YEAR

State only amounts of which you are certain or can reasonably estimate. Do not include financial aid for which you are applying.

| OCMA – Paul A. Corey Scholars complete and accurate.  Signature of Applicant  We are aware that this applicant signature of OCMA member Verifying this application  Company | is applying for an OCMA          | best of my knowledge,  | ort this effort.       | Date Date  |
|---|----------------------------------|--|------------------------|--|
| OCMA – Paul A. Corey Scholars complete and accurate.  Signature of Applicant  We are aware that this applicant  Signature of OCMA member Verifying this application         | is applying for an OCMA          | best of my knowledge,  | ort this effort.       | Date   |
| OCMA – Paul A. Corey Scholars complete and accurate.  Signature of Applicant  We are aware that this applicant  Signature of OCMA member                                    | is applying for an OCMA          | best of my knowledge, the state of my knowledge, | the information        |  |
| OCMA – Paul A. Corey Scholars complete and accurate.  Signature of Applicant  | ship, I certify that, to the     | best of my knowledge,  | the information        | Date   |
| OCMA – Paul A. Corey Scholars complete and accurate.  | ship, I certify that, to the     | best of my knowledge,  | the information        | Date   |
| OCMA – Paul A. Corey Scholars   |                                  |  |                        |  |
|   |                                  |  | rade point ave         | erage. In making this application for the contained in this application is |
|   |                                  |  |                        |  |
| State the amount of scholarship f   | unds you are seeking and         | provide an estimated b   | oreakdown of           | how these funds will be spent.   |
| Parent/Guardian Signature   |                                  |  | Date                   |  |
| Number of dependent children att<br>Parents/guardians' income:  | tending college, including appli | cant?  |                        | 0,000 +  |
| Required Signatures  If you are claimed by your paren   | ts/quardians as a tay dad        | action, they must complete   | ata and sign t         | he section below   |
| educational program and, if so, th  |                                  |  | i the expense          | s to be incurred in participating in this                                  |
| 8. Other Total  | \$<br>\$                         |  | Total                  | \$   |
| <ul><li>6. Financial aid from parents</li><li>7. Loans (bank, school, government)</li></ul>   | \$<br>\$<br>\$                   | <ul><li>3. Room &amp; Board at so</li><li>4. Rent, food, utilities</li><li>5. Clothing, laundry, c</li><li>6. Other</li></ul>  | off campus<br>cleaning | \$<br>\$<br>\$   |
| 5. Earnings from spouse   |                                  | 2. Fees, books, supplied   |                        | \$   |
| 5. Earnings from spouse   | \$<br>\$<br>\$                   |  | In-State               | \$<br>\$   |

| ACTIVITIES  |
|---|
| List any academic honors you have received.   |
|   |
|   |
|   |
| List any office or other leadership positions you have held.  |
|   |
|   |
| ·   |
| List your current and previous community or extracurricular activities.   |
|   |
|   |
|   |
| HISTORY OF APPLICANT  |
| Write a short summary about yourself. Be sure to include why you are best qualified to receive the OCMA Scholarship. You may attach additional pages if more space is required. |
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|   |

| GENERAL INFORMATION          |                           |                    |                  |                |  |  |  |  |
|------------------------------|---------------------------|--------------------|------------------|----------------|--|--|--|--|
| Last Name                    |                           | First _            |                  | Middle Initial |  |  |  |  |
| Home Address                 | 3                         |                    |                  |                |  |  |  |  |
| City, State                  | City, StateZip            |                    |                  |                |  |  |  |  |
| Phone (                      |                           |                    |                  |                |  |  |  |  |
| Date of Birth _              |                           |                    |                  |                |  |  |  |  |
| EMPLOYMENT HISTORY           |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| Employer N                   | Name/Address              |                    | Position/Duties  | Dates          |  |  |  |  |
| 1.                           |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| 2.                           |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| 3.                           |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| 4.                           |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| 5.                           |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| <b>EDUCAT</b>                | ION                       |                    |                  |                |  |  |  |  |
| You MUST in                  | clude a transcript of you | ur school records  |                  |                |  |  |  |  |
|                              | Attended/Attending        | ar senoor records. |                  |                |  |  |  |  |
|                              | NameCity                  |                    |                  |                |  |  |  |  |
| Date Graduated/GraduatingGPA |                           |                    |                  | 'A             |  |  |  |  |
| College/Vocat                | ional School Attending    |                    |                  |                |  |  |  |  |
| Name                         | Name City                 |                    |                  |                |  |  |  |  |
|                              |                           |                    |                  |                |  |  |  |  |
| Years Attended               | d                         |                    | (                | GPA            |  |  |  |  |
| I will be a                  | □ Freshman                | ☐ Junior           | ☐ Other, explain |                |  |  |  |  |
|                              | ☐ Sophomore               | ☐ Senior           |                  |                |  |  |  |  |