



## Department of New Hampshire Marine Corps League Scholarship Fund

*The Department of NH Marine Corps League Scholarship Fund grants a limited number of educational scholarships to qualified individuals who are pursuing full time undergraduate studies or technical training at a recognized institution.*

### ***Requirements for Obtaining a Scholarship***

All applications for scholarships shall be mailed to the DNHMCL Scholarship Committee, address which may be found at the end of the criteria.

All applicants must complete the scholarship application form and ensure that all required supporting documentation is enclosed with the application in a single package.

An application may be submitted without a letter of acceptance but said letter must be provided before the actual scholarship will be awarded

### ***DNHMCL SCHOLARSHIP APPLICATION CRITERIA***

#### **Eligibility:**

- Active duty or honorably discharged Marines.
- Spouse, child or step-child of a Marine who has died while on active duty.
- Active MCL member. (member in good standing-dues paid)
- Spouse, child, step-child, grandchild, or step-grandchild of any active MCL member.
- Member of Young Marines and/or Marine JROTC for at least six months.

#### **Requirements:**

- Completed application form.
- Most recent H.S. and/or college transcripts (at least two years).
- Letter of acceptance from college, university, or trade school.
- Letter of recommendation.
- 1 page essay on one of the following subjects:
  - My chosen field of study.
  - Why I love America.
  - A Marine I have known.

#### **Deadline:**

They must be postmarked by **May 1st** and received by **May 10th**. Applicants will be informed of results by mail no later than **June 30th**. Completed applications are to be mailed to:

**DNHMCL Scholarship**  
**Cpl Richard Demers Detachment**  
**P O Box 301**  
**Berlin NH 03570**



# Department of New Hampshire Marine Corps League Scholarship Application

*Must be typed or legibly printed*

Please Check One: "New" \_\_\_\_\_ "Renewal" \_\_\_\_\_

Application Date: \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Birth Date \_\_\_\_\_

Address: Number & Street \_\_\_\_\_

Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone #: H \_\_\_\_\_ C \_\_\_\_\_

Applicant's email: \_\_\_\_\_

High School Attended: \_\_\_\_\_

College, University, or Technical School \_\_\_\_\_

Expected Entry Date: \_\_\_\_\_ Class Year (Fall Term): 1 2 3 4 (Circle One)

Occupational or Professional Goals:  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

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## ***Sponsor Eligibility***

Member MCL- Yes \_\_\_\_\_ No \_\_\_\_\_ (if yes please skip to Department Unit Certification)

Sponsor's relationship to applicant: Father \_\_\_\_\_ Mother \_\_\_\_\_ Grandparent \_\_\_\_\_

Sponsor's Name: Last \_\_\_\_\_ First: \_\_\_\_\_ MI \_\_\_\_\_

## ***FOR DEPARTMENT AND COMMITTEE USE ONLY***

***Department Certification:*** The Paymaster certifies the applicant or sponsor is a member in good standing. Detachment Name: \_\_\_\_\_ # \_\_\_\_\_

Paymaster Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Applicant has been certified and application has been received by committee*

Signature of Committee Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Approved for scholarship: Date \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_