

Ohio Marine Trades Association Educational Foundation, Inc.

# Scholarship Application



OHIO MARINE TRADES ASSOCIATION

**EDUCATION  
FOUNDATION**

We strongly believe in the transformative power of education. The Ohio Marine Trades Association Educational Foundation, Inc. scholarship intends to provide individuals with the opportunity to unlock their full potential in their pursuit of academic excellence, especially in the marine industry.

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**Please Return Completed Application To:**

**Mail**

Ohio Marine Trades Association Educational Foundation, Inc.  
1269 Bassett Rd, Westlake, OH 44145

**Email**

[info@omta.com](mailto:info@omta.com)

THE OHIO MARINE TRADES ASSOCIATION EDUCATIONAL FOUNDATION, INC. IS IN COMPLIANCE WITH ALL FEDERAL AND STATE NON-DISCRIMINATION LAWS AND REGULATIONS. NO PERSON SHALL BE EXCLUDED FROM PARTICIPATION IN THIS PROGRAM ON THE BASIS OF RACE, CREED, RELIGION, NATIONAL ORIGIN, OR SEX.

# SCHOLARSHIP or GRANT APPLICATION



OHIO MARINE TRADES ASSOCIATION  
**EDUCATION  
FOUNDATION**

Ohio Marine Trades Association  
Educational Foundation, Inc.  
1269 Bassett Rd, Westlake, OH 44145

**Applicant Information:**

**Deadline: August 1st, 2025**

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
Last Name First Name Middle Phone

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Student Identification Number Email

Overall future education plans \_\_\_\_\_

What institution do you plan to attend? \_\_\_\_\_

What is the anticipated cost of one year's education? \_\_\_\_\_

How do you plan to finance your education? \_\_\_\_\_

Where did you learn about this scholarship? \_\_\_\_\_

Please indicate below if your sibling(s) will be in college at the same time as you.

Name of Sibling, Age, Yes/No \_\_\_\_\_

Current GPA \_\_\_\_\_ Class Rank/Class Size (if applicable) \_\_\_\_\_ SAT Score \_\_\_\_\_ ACT Score \_\_\_\_\_

Please list all extra-cirricular activities you participated in during high school and/or college.

## High School

Name of School \_\_\_\_\_ City & State \_\_\_\_\_

Years Attended \_\_\_\_\_ Last Grade Completed 9 10 11 12 Did you Graduate? Y / N

## College

Name of School \_\_\_\_\_ City & State \_\_\_\_\_

Years Attended \_\_\_\_\_ Degree \_\_\_\_\_ Did you Graduate? Y / N

Name of School \_\_\_\_\_ City & State \_\_\_\_\_

Years Attended \_\_\_\_\_ Degree \_\_\_\_\_ Did you Graduate? Y / N

## Other

Name of School \_\_\_\_\_ City & State \_\_\_\_\_

Years Attended \_\_\_\_\_ Degree \_\_\_\_\_ Did you Graduate? Y / N

## Employment History

1

Employer Name Position Dates of Employment

Address Phone

2

Employer Name Position Dates of Employment

Address Phone

3

Employer Name Position Dates of Employment

Address Phone

## Educational / Employment References (two reference letters required)

1

Name Occupation

Address Phone

2

Name Occupation

Address Phone

3

Name Occupation

Address Phone

## Parent/Guardian Information (choose one):

Last Name First Name Relationship Phone

Street Address City State Zip

Father's Occupation / Employer: \_\_\_\_\_

Mother's Occupation / Employer: \_\_\_\_\_

## Before this application will be considered, the applicant must provide the following:

1. A completed application
2. A written 200-300 word essay stating your career goals and why you feel you are deserving of a scholarship or grant - your application will also be judged on clarity and communicative skills
3. Two letters of reference from persons other than relatives or employers
4. Your current high school or college transcript
5. Other documents you decide to provide will be taken into consideration as well

I hereby authorize the Board of Directors of the Ohio Marine Trades Association Educational Foundation, Inc. to inquire and verify any information contained on this application form. The Foundation shall not be liable for any damages which may result from such inquiry or verification. As part of this authorization, I hereby authorize the individuals listed herein to release to the Foundation information as to my character, ability and performance. I understand that making any misleading or untruthful statements on this application may result in my disqualification if I receive a scholarship or grant. If accepted for financial aid, I understand that this application will become a permanent part of my record.

Signature of Applicant Date

Signature of Parent/Guardian (if applicant is a minor) Date



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