



Scholarship Application

DUE DATE: April 1st

Please mail an official transcript and a letter of recommendation with your application to:

**Over the Road Gang, Inc.
Attn: Scholarship Committee
PO Box 843, Ottawa, KS 66067**

Student Name: _____ Phone Number: _____
Current School: _____
Social Security or ID# _____ Expected Graduation Date: _____
Home Address: _____
Parent(s) Name: _____
Class Rank: _____ GPA: _____ ACT Composite: _____

(Scholarships are intended for students interested in pursuing automotive-related fields.)

Please explain why you are interested in pursuing a degree related to the **automotive industry**, what career you will be working toward and how you want automobiles to be a part of your future career.

What school will you be attending to get your training? _____

When do you plan to start attending the school listed above? _____

What are your career goals after you have completed a post-secondary program? _____

How many days of school did you miss during the last year? _____

Will you attend the award ceremony at your school for recognition? Yes _____ No _____ N/A _____

What organizations or activities have you been active in during your schooling?

Why should our organization choose you to receive this scholarship?

Over the Road Gang, Inc.
Box 843, Ottawa, KS 66067
www.olmarais.com



If you are given an opportunity to receive this scholarship, would you be willing to attend a meeting of the “Over the Road Gang” for an introduction to the membership? Yes _____ No _____

PLEASE READ CAREFULLY:

I understand that if I am chosen to receive this scholarship I am expected to attend classes regularly and maintain passing grades. I agree to submit first semester grades before any second semester payment can or will be made by the Over the Road Gang.

Scholarship dollars will be paid directly to the school for which my scholarship was awarded only after I am enrolled in classes and proof of enrollment has been submitted to the Over the Road Gang.

Half of the scholarship will be paid the first semester and the other half will be paid the second semester as long as I am a student in good standing.

If I am chosen to be a scholarship recipient, I agree to provide all of the above requested information to the Over the Road Gang, Inc. before payment can be made to the school **listed on my original scholarship application.** The decision to change schools will require that I submit a new application.

The information I have provided on this application is true and correct.

Signature of Applicant: _____

Signature of Parent (s): _____

Additional comments:

For questions, contact Scholarship Committee Chair:

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