



Multop Financial Scholarship Program

THE PROGRAM

Multop Financial has established the Multop Financial Scholarship Program to assist clients' children, relatives, or students from within the community nominated by a client who plan to continue education in college or vocational school programs. Scholarships are offered each year for full-time study at an accredited institution of the student's choice.

This scholarship program is administered by Multop Financial. Awards are granted without regard to race, color, creed, religion, gender, disability, or national origin.

ELIGIBILITY

Applicants to the Multop Financial Scholarship Program must be age 23 or under and –

- Related to a Multop Financial Client

OR

- Students who have been nominated or referred by a Multop Financial client
-

AWARDS

If selected as a recipient, the student will receive a one-time \$2,000 award. Awards are not renewable, but students may reapply to the program each year they meet eligibility requirements. Awards are for undergraduate or graduate study. Award will be paid directly to the educational institution for the benefit of the student.

APPLICATION

Interested students must complete the application and mail it along with a current, complete official transcript of grades to Multop Financial, postmarked no later than March 31st. On-line transcripts and grade reports are not acceptable. Applicants will receive acknowledgement of receipt of their application. If an acknowledgement card is not received within three weeks, applicants may call Multop Financial to verify that the application has been received.

Applicants are responsible for gathering and submitting all necessary information. Instructions for completing the Financial Data section of the application are included. Applications are evaluated on the information supplied; therefore, answer all questions as completely as possible. Incomplete applications will not be evaluated. All information received is considered confidential and is reviewed only by the Multop Financial Client Advisory Board.

1. Application Procedures:

In addition to the Multop Financial application form, the student must submit:

- A short three paragraph essay OR a digital presentation to explain why the student has chosen his or her career path, why the student will be successful, and how the student's work in this area could help others in the community.
-

SELECTION OF RECIPIENTS

Scholarship recipients are selected on the basis of academic record, demonstrated leadership and participation in school and community activities, honors, work experience, statement of goals and aspirations, and unusual personal or family circumstances.

Selection of recipient is made by the Multop Financial Client Advisory Board. In no instance does any officer, contractor or employee of Multop Financial play a part in the selection.

Recipients will be announced in June. Not all applicants to the program will be selected as recipients. Students may reapply to the program each year they meet eligibility requirements.

PAYMENT OF SCHOLARSHIPS

Payments are made in two payments of \$1,000 on August 1st and January 1st. Checks are mailed to recipient's home address and are made payable to the school for the student.

OBLIGATIONS

Recipients have no obligation to Multop Financial. They are, however, required to supply Multop Financial with complete transcripts when requested and to notify Multop Financial of any changes of address, school enrollment, or other relevant information.

REVISIONS

Multop Financial reserves the right to review the conditions and procedures of this scholarship program and to make any changes at any time including termination of the program.

ADDITIONAL INFORMATION

Questions regarding the scholarship program should be addressed to:
Multop Financial Scholarship Program
333 Calluna Court, Suite 205
Bellingham, WA 98226

**For Multop
Financial
Use Only**

ID #	AA	PD	RIC/CS	CPA	SATV	SATM	ACTE	ACTM	TOTAL

**Applicant
Data**
TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly. Application postmark deadline

Last Name _____ First _____ Middle Initial _____

Permanent Home Mailing Address _____ Apartment # _____

City _____ State _____ Zip _____

Telephone () _____ E-Mail Address _____

Social Security # _____ Date of Birth _____

 Please indicate your status. (For statistical purposes only) Male Female

**Client
Information**

Last Name _____ First _____ Middle Initial _____

Telephone () _____ E-Mail Address _____

Mailing Address _____ Apartment # _____

City _____ State _____ Zip _____

Relationship to Applicant _____

 The applicant has been nominated by the client Yes No

**Parent or
Guardian
Information
(if different)
From above**

Last Name _____ First _____ Middle Initial _____

Telephone () _____ E-Mail Address _____

Mailing Address _____ Apartment # _____

City _____ State _____ Zip _____

Relationship to Applicant _____

**High
School
Data**

High School Data

School Name _____ High School Graduation Date: Month ____ Year ____

City _____ State _____ Telephone () _____

**Post –
Secondary
School
Data**

Name of post-secondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.)

 Use official school names. **Do not use abbreviations.**

 _____ City _____ State _____
 _____ City _____ State _____

 4 yr. College or University 2 yr. Community or Junior College

 Vocational-Technical School Other, Explain _____

Year in school next year: 1 2 3 4 5 or Graduate Study

Major or course of study: _____ Expected college graduation date: Month ____ Year ____

 Degree Sought: Bachelor Associate Certificate Other _____

 Student will: live on campus live off campus commute from home

 If school choice is a public institution, applicant will pay: in-state resident tuition out-of-state- tuition

If space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Your name, address, and name of this scholarship should be included on all attachments.

Work Experience

Describe your work experience during the past four years (e.g., food server, babysitter, lawn mowing, and office work.). Indicate dates of employment for each job and approximate number of hours worked for each week. List amounts earned at each job.

Position	Date From (mo/yr)	Date To (mo/yr)	Hours Per Week	Amount Earned

Activities, Awards And Honors

List all school activities in which you have participated during the **past 4 years** (e.g., student government, music, sports, etc.) List all community activities in which you have participated without pay during the **past 4 years** (e.g., Red Cross, church work, and volunteer work). Indicate all special awards and honors.

Activity	No. of Years Partic.	Special Awards, Honors, Offices Held	Activity	No. of Years Partic.	Special Awards, Honors, Offices Held

Goals And Aspirations

Make a statement of your plans as they relate to your educational and career objectives and long-term goals.

Unusual Circumstances

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

Applicant Appraisal

To be completed by a high school or college counselor or advisor, an instructor, or a supervisor.

You have been asked to provide information in support of this application for financial aid. Please give immediate and serious attention to the following statements. When complete, please return to applicant or photocopy this section and return to applicant in a sealed envelope.

The applicant's choice of a postsecondary education program is	<input type="checkbox"/> Extremely Appropriate	<input type="checkbox"/> Very appropriate	<input type="checkbox"/> Moderately Appropriate	<input type="checkbox"/> Inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> Extremely Well	<input type="checkbox"/> Very Well	<input type="checkbox"/> Moderately Well	<input type="checkbox"/> Not Well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> Extremely Well	<input type="checkbox"/> Very Well	<input type="checkbox"/> Moderately Well	<input type="checkbox"/> Not Well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> Extremely Well	<input type="checkbox"/> Very Well	<input type="checkbox"/> Moderately Well	<input type="checkbox"/> Not Well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> Extremely Well	<input type="checkbox"/> Very Well	<input type="checkbox"/> Moderately Well	<input type="checkbox"/> Not Well
The applicant's respect for self and others is	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

Comments (Do not name student): _____

Appraiser's Name _____ Title _____ Telephone () _____

Appraiser's Signature _____ Organization _____ Date _____

Transcript Information

- High school seniors and students who have completed less than one full semester** of postsecondary education must include a high school transcript of grades and have the following section completed by the appropriate school official.
- Students currently enrolled in college or vocational-technical school** must include recent college or vo-tech transcript of grades. (Completion of the following section is not necessary.)

Application ranks _____ in a class of _____	Cumulative Grade Point Average Weighted: _____/4.0 Scale Unweighted: _____/4.0 Scale	PSAT Verbal Math	SAT 1 Verbal Math	ACT English Math
--	--	-----------------------	------------------------	-----------------------

School Official's Signature _____ Date _____ Title _____ Telephone () _____

School Official's Address: _____ City _____ State _____ Zip _____

Application Checklist

This student is responsible for submitting all materials to Multop Financial on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when Multop Financial has received all of the following materials:

- Student Application with completed Applicant Appraisal
 - Current complete transcript(s) of Grades (including grading scale (On-line transcripts are not acceptable)
- Postmark deadline _____

All materials, including transcript, must be addressed to:
Multop Financial Scholarship Program
 333 Calluna Court, Suite 205
 Bellingham, WA 98226

Certificator

Multop Financial has the sole responsibility for selecting recipients based on criteria as set forth in the program's descriptive brochure. This application becomes the property of Multop Financial. (It is recommended that you keep a copy for your files).

I acknowledge decisions of Multop Financial are final. I certify that I meet the basic eligibility requirements of the program as described in the brochure and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of information I have given on this form, including a copy of my US Income Tax Return if I have been nominated by a client. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature _____

Date _____

Parent's Signature _____

Date _____



Multop Financial Scholarship Program

FINANCIAL ASSISTANCE QUESTIONNAIRE For 2010-2011 School Year

PARENTS' INCOME, EXPENSE, AND ASSET DATA (FOR THE YEAR JANUARY 1, 2009 TO DECEMBER 31, 2009)

The applicant's parent(s) must complete the following section. NOTE: If legally classified as an independent student, use this section to supply your (and your spouse's, if any) financial information. Indicate whether the information is from:

- Estimates based on current income information to be filed by April 15, 2009
- A completed tax return – IRS FORM 1040 filing date of April 15, 2009

State of Residence (state where parents or independent student reside and pay state income tax) _____

- 1. Adjusted gross income (FORM 1040) \$ _____
- 2. Total federal tax paid (FORM 1040) \$ _____
- 3. Total income of father or self if independent student \$ _____
 Total income of mother \$ _____
- 4. Yearly untaxed income and benefits: Social Security, AFDC, child support, other \$ _____
- 5. Medical/Dental expenses not paid by insurance (exclude premiums) \$ _____
- 6. Total cash, checking, savings, cash value of stocks, etc. (exclude retirement plan funds, IRA, 401(k)) \$ _____
- 7. Total number of family members living in the household and primarily supported by the reported income # _____

ADDITIONAL INFORMATION

Parents' or independent student's current marital status is:

- Single Married Separated Divorced Widowed

Total number of family members who will be attending a post-secondary school at least ½ time during the 2010-2011 school year, including applicant.....# _____

INSTRUCTIONS FOR COMPLETING THE FINANCIAL DATA SECTION OF THE APPLICATION

The Financial Data section of the application should be completed by a parent. Information should be from a completed tax return or based on estimated information to be filed with the IRS.

1. State of Residence is the state where the parents reside and pay state income tax.
2. Adjusted Gross Income can be found on IRS FORM 1040 and is gross income reduced by specific adjustments allowed by law.
3. Total Federal Tax Paid includes the total amount of federal income tax to be paid as reported on IRS FORM 1040. This is not the amount withheld from employee's paychecks. (The amount withheld should be adjusted by any refund or additional taxes due.) Do not report state income tax.
4. Total Income of parent(s) should be reported individually. Provide information for both natural parents, when possible. If the student resides with only one parent, financial information must be received from the parent who claims the child as a dependent for tax purposes. If a parent has remarried, the spouse's information is required if the spouse is a legal guardian of the student, or claims the student as a dependent, or the student is included in the spouse's benefit plan. If necessary, two Financial Data sections may be submitted by the student. A copy of the Financial Data section may be made in order for one to be completed by each parent.
5. Untaxed Income and Benefits include any other income or benefits not included in the adjusted gross income figure. Do not include untaxed contributions to retirement plans.
6. Medical and Dental Expenses include only those expenses not paid by insurance. Do not include premium payments.
7. Total Cash, Checking, Savings, Cash Value of Stocks, etc., include liquid assets that can be used for educational expenses. Do not include IRA, 401k, or other retirement plan funds.
8. Total Number of Family members living in the household and primarily supported by the reported income includes dependent college students living away from home.
9. Marital Status is the current status of the person from whom the financial information is submitted.
10. Total Number of Family Members Attending College includes all family members attending a two- or four-year college, university, or vocational-technical school at least half-time. Be sure to include the applicant in this number.

NOTE: Any exceptions to providing financial information as instructed above must be submitted to Multop Financial in writing.
