

# **Miami Lakes Veterans Families Scholarship Application**

Presented by the Town of Miami Lakes' Veterans Committee

The Veterans Committee of the Town of Miami Lakes is proud to announce the establishment of a scholarship dedicated to supporting the educational aspirations of veterans families in our community. Interested applicants can submit to the Miami Lakes Town Hall (6601 Main Street) by **May 3, 2024**.

## **Qualifications**

A qualified applicant will be one of the following:

- A veteran residing in Miami Lakes currently enrolled in a college, trade, or profession school, in good academic standing, or
- A high school junior or senior in good academic standing, or
- An adult child of a Miami Lakes veteran currently enrolled in a college, trade, or profession school, in good academic standing, or
- A grandchild of a Miami Lakes resident veteran currently enrolled in a college, trade, or profession school, in good academic standing

#### A qualified military member will be defined as being:

- A resident of the Town of Miami Lakes with verifiable proof of residency
- A veteran with verifiable proof of honorable service (i.e. DD214), or
- An active duty member, verifiable via Active Duty or Active Reserve Military I.D.

## Student and/or veteran must be a Miami Lakes resident.

#### Applicant Information

Name	Date of Birth
Address	
School	Phone Number
Please select relationship to qualifying militar	ry member:
$\Box$ I am the qualified military member	
$\Box$ High school junior or senior child of qualified r	nilitary member
$\Box$ Adult child of qualified military member	
$\Box$ Grandchild of qualified military member	
Military Member Information:	
Name	Branch of Service
Address	Years of Service
Phone Number	Continue to Page 2
All completed applications must be received at Town Hall by May 3, 2024.	



Check list: Please attach the following items.

## **QUALIFIED MILITARY MEMBER PROOF OF RESIDENCY**

The service member's proof of Miami Lakes residency. Examples include a copy of driver's license or utility bill.

**QUALIFIED MILITARY MEMBER PROOF OF SERVICE** 

The service member's proof of Active Duty Status of Honorable Discharge.

Please attach an official <u>sealed</u> transcript to this application. <u>Please request the redaction of your</u> <u>Social Security number</u>.

## **Consent**

□ I certify that I am over the age of 18, and I understand that by submitting this form, the information provided is considered a public record, pursuant to Chapter 119 of Florida State Statute.

 $\Box$  I certify that the information provided is accurate and will subject to verification.

APPLICANT SIGNATURE

DATE

All completed applications must be received at Town Hall by May 3, 2024.