

## Fostering Futures Scholarship Application

**INSTRUCTIONS:** Please complete this form and submit to MET with a copy of the student's financial aid award letter (or any other document to support off-campus expenses requested, i.e., rental agreement) and an unofficial photocopy of your most recent college transcript (not applicable to incoming freshmen).

Fostering Futures Scholarship is available to students on a first-come, first served basis. The student must have been placed by the Department of Human Services in the Michigan foster care system on or after the 13th birthday. There is no maximum age restriction for the student. The student must be attending a Michigan public or private 4-year college/university or a community college.

### PART 1: STUDENT INFORMATION

First Name	Middle Name	Last Name	
Prior Name (if applicable)			
Date of Birth		Social Security Number	
Address			
City	State	ZIP Code	County
Telephone Number		Email Address	

### PART 2: COLLEGE/UNIVERSITY INFORMATION

Name of College	Current College GPA (if applicable)	High School Graduation Year
Semester (Check one) <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer    Year: _____		Dollar Amount Requested \$ _____
Select all needs/services for which the funding will be used (check all that apply)		
<input type="checkbox"/> Tuition..... Dollar amount requested \$ _____	<input type="checkbox"/> Board..... Dollar amount requested \$ _____	
<input type="checkbox"/> Fees..... Dollar amount requested \$ _____	<input type="checkbox"/> Books..... Dollar amount requested \$ _____	
<input type="checkbox"/> Room..... Dollar amount requested \$ _____		
<input type="checkbox"/> Supplies or equipment required for enrollment..... Dollar amount requested \$ _____		

### PART 3: FOSTER CARE INFORMATION

Are you in foster care now? <input type="checkbox"/> Yes <input type="checkbox"/> No	County of Foster Care Case (if known)
Caseworker Name (if open foster care case)	

### PART 4: CERTIFICATION

By signing this application, I certify that I have read and understand all parts of this application and give permission to Michigan Education Trust (MET) and Department of Human Services (DHS) staff to use my information for statistical reporting purposes as required by the Michigan Legislature. In addition, in compliance with the Family Educational Rights and Privacy Act of 1974, I permit my caseworker, guardians and/or college representative to review with MET and DHS staff my academic record and any other information, as needed, related to my academic progress during my academic career.

I understand that my grades and participation in the MET Fostering Futures Program will be reviewed at the conclusion of every semester. If I have met the conditions of this agreement and of the college or university's standards for academic progress and behavior, I may be eligible for future scholarships and I understand that I must apply each semester. I am aware that if I fail to comply with the conditions set forth in this agreement, I will jeopardize my continued eligibility for this scholarship.

My signature also authorizes MET to release funds to the college indicated on this application as appropriate according to the terms and conditions of the MET contract.

Signature of Student	Date
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Did you remember to attach the following required documents:

- |  |  |
|--|--|
| <input type="checkbox"/> Fostering Futures Scholarship Application | <input type="checkbox"/> Supporting Documentation of Need                    |
| <input type="checkbox"/> Financial Aid Information                 | <input type="checkbox"/> Unofficial photocopy of your most recent Transcript |

#### SEND COMPLETED FORM AND REQUIRED DOCUMENTATION TO:

Michigan Education Trust  
PO Box 30198  
Lansing MI 48909  
Fax: (517) 373-6967

**\*PLEASE ALLOW TWO (2) WEEKS TO RECEIVE A REPLY FROM MET.**