



Department of New Hampshire Marine Corps League Scholarship Fund

The Department of NH Marine Corps League Scholarship Fund grants a limited number of educational scholarships to qualified individuals who are pursuing full time undergraduate studies or technical training at a recognized institution.

Requirements for Obtaining a Scholarship

All applications for scholarships shall be mailed to the DNHMCL Scholarship Committee, address which may be found at the end of the criteria.

All applicants must complete the scholarship application form and ensure that all required supporting documentation is enclosed with the application in a single package.

An application may be submitted without a letter of acceptance but said letter must be provided before the actual scholarship will be awarded

DNHMCL SCHOLARSHIP APPLICATION CRITERIA

Eligibility:

- Active duty or honorably discharged Marines.
- Spouse, child or step-child of a Marine who has died while on active duty.
- Active MCL member. (member in good standing-dues paid)
- Spouse, child, step-child, grandchild, or step-grandchild of any active MCL member.
- Member of Young Marines and/or Marine JROTC for at least six months.

Requirements:

- Completed application form.
- Most recent H.S. and/or college transcripts (at least two years).
- Letter of acceptance from college, university, or trade school.
- Letter of recommendation.
- 1 page essay on one of the following subjects:
 - My chosen field of study.
 - Why I love America.
 - A Marine I have known.

Deadline:

They must be postmarked by **May 1st** and received by **May 10th**. Applicants will be informed of results by mail no later than **June 30th**. Completed applications are to be mailed to:

DNHMCL Scholarship
Cpl Richard Demers Detachment
P O Box 301
Berlin NH 03570



Department of New Hampshire Marine Corps League Scholarship Application

Must be typed or legibly printed

Please Check One: "New" _____ "Renewal" _____

Application Date: _____

Name: Last _____ First _____ MI _____

Birth Date _____

Address: Number & Street _____

Apt. # _____

City: _____ State: _____ Zip: _____

Telephone #: H _____ C _____

Applicant's email: _____

High School Attended: _____

College, University, or Technical School _____

Expected Entry Date: _____ Class Year (Fall Term): 1 2 3 4 (Circle One)

Occupational or Professional Goals: _____

Applicant's Signature: _____

Sponsor Eligibility

Member MCL- Yes _____ No _____ (if yes please skip to Department Unit Certification)

Sponsor's relationship to applicant: Father _____ Mother _____ Grandparent _____

Sponsor's Name: Last _____ First: _____ MI _____

FOR DEPARTMENT AND COMMITTEE USE ONLY

Department Certification: The Paymaster certifies the applicant or sponsor is a member in good standing. Detachment Name: _____ # _____

Paymaster Signature: _____ Date: _____

Applicant has been certified and application has been received by committee

Signature of Committee Chair: _____ Date: _____

Approved for scholarship: Date _____ Amount: \$ _____

Comments: _____
