

OTTAWA COUNTY COMMUNITY FOUNDATION

Burton D. Morgan Entrepreneurial Scholarship

PURPOSE:

The Burton D. Morgan Foundation is providing scholarships through the Ottawa County Community Foundation to provide educational scholarships to individuals who desire to complete training/coursework to enhance their entrepreneurial goals. Training may include coursework to acquire new skills relevant to the applicant’s entrepreneurial endeavors or update/renew/expand job skills necessary to be successful with your planned enterprise.

QUALIFICATIONS FOR ELIGIBILITY:

1. Current resident of Ottawa County, Ohio age 18 or over.
2. Have a written business plan for an entrepreneurial enterprise.
3. Desire to obtain educational training to further your entrepreneurial goals.

HOW TO APPLY:

1. Complete the scholarship application form below.
2. Mail all application materials to: Dave Slosser, Scholarship Chairman, 4411 East Harbor’s Edge Dr., Port Clinton, OH 43452. Do not bind or staple the application. Direct questions to Dave Slosser at 419-271-2752 or sloss@cros.net.

Application

Name of Applicant _____
(Last) (First) (MI)

Home Address _____
(City) _____ (State) _____ (Zip) _____

E-mail _____ Cell () _____ Home Phone () _____

1. Date of high school graduation or GED completion. _____

2. List any advanced education/training you have received beyond high school.

School	Training/coursework

3. Attach a one-page essay that explains your entrepreneurial goals and explain how this scholarship would benefit your entrepreneurial spirit and desire to succeed.

4. Name and address of school/college you plan to attend.

5. Identify the program of study, coursework, or training in which you will enroll.

6. Date your coursework begins. _____

7. Amount you are requesting to complete this training/coursework. \$ _____

8. Share any additional information you feel would be pertinent to your application.

I hereby certify that the information provided on this application is true and correct. I agree, if requested, to provide the Ottawa County Community Foundation with any additional information needed to determine my qualifications for this scholarship. If I become a scholarship recipient, and if requested by the Ottawa County Community Foundation, I agree to furnish reports which can be used to determine my academic progress and use of scholarship funds. Also, I give my permission to Ottawa County Community Foundation, Inc. to release any pertinent information for publicity purposes.

Applicant's signature _____ Date _____