



Military Road School Preservation Trust

"Building the future on the foundation of the past"

**Post Office Box 56425
Washington, D.C. 20040-6425
www.mrspt.org**

February 28, 2017

Thank you for your interest in the Military Road School Donnesa Lucas Memorial Scholarship Fund Awards program.

Each year, the Military Road School Preservation Trust (MRSPT) awards one or more financial scholarships to students who permanently reside within the Washington metropolitan area and are continuing their formal education through the pursuit of a college degree. These awards are provided to assist students in the process of obtaining a B.A. degree with the cost of books, supplies, equipment, and other fees related to their enrollment at an accredited college or university.

*Attached are application forms for the 2017 – 2018 school year. Please note that there are two sets: the “First-Year” application is for first-time applicants; and the “Second/Third/Fourth-Year” application for previous award recipients who wish to re-apply. These forms cannot be submitted electronically; they must be downloaded and forwarded by regular mail. **Completed applications must be received by June 9, 2017.***

Please be sure to print legibly and to provide all information and documents requested. If you have any questions regarding the forms, application process, or this organization, inquiries may be directed to Ms. Theresa Saxton at thelasax@mrspt.org or you may call MRSPT’s office at 202-241-7276.

All applicants will be notified by mail regarding their eligibility status, and qualified candidates may be requested to schedule a personal interview during the final selection process. Scholarships will be awarded to recipients prior to the beginning of the fall semester, and a check made payable to the student and the institution subsequently forwarded to the financial office of the appropriate college or university. No exceptions to these procedures for the disbursement of funds will be made.

Again, we thank you for your interest in MRSPT’s scholarship awards program and wish you every success in your educational endeavors.

**MILITARY ROAD SCHOOL
DONNESSA LUCAS MEMORIAL SCHOLARSHIP FUND AWARD
FIRST-YEAR APPLICATION FORM**

Please print all information clearly

Name: _____
(last) (first) (middle initial)

Home Address:* _____
(street address or P.O. Box No.)

(city) (state) (zip code)

Home Telephone No. (_____) _____ Alternate No.(_____) _____

Email address: _____ Date of birth: ____/____/____

Name of college you plan to attend or are attending: _____

College Address * _____
(street address) (city, state & zip code)

Declared Major _____ Declared Minor _____

Name of high school graduated from: _____ (year) _____

Current grade point average: _____ Total number in class: _____

SAT or ACT score: _____ Rank in class: _____

Names & contact information for three references (**not** related to you): (**please include one teacher, counselor or professor**):

1. _____
*(name) (contact info: phone # **or** mailing address) (relationship)*

2. _____
*(name) (contact info: phone # **or** mailing address) (relationship)*

3. _____
*(name) (contact info: phone # **or** mailing address) (relationship)*

List school-related activities (athletics, clubs, music programs, year book staff, etc.)

*** Applicant must be a permanent resident of the Washington, D.C. Metropolitan area and attend an accredited college or university located within the continental United States.**

**MILITARY ROAD SCHOOL
DONNESSA LUCAS MEMORIAL SCHOLARSHIP FUND AWARD
FIRST-YEAR APPLICATION FORM**

Please print all information clearly

List any leadership role(s) in the activities noted (i.e. President, VP, Treasurer, Secretary, Captain, etc.):

List academic honors (National Honor Society, Honor Roll, etc.):

List community-related activities, work with charity organizations, volunteer service, and any MRSPT programs, activities, or events which you have attended or participated in:

Provide any additional information you would like to have considered:

Applicant's Signature _____ **Date:** _____

Parent / Guardian's Name (printed) _____
(if applicant is under 18 years of age)

Parent / Guardian's Signature _____ **Date:** _____

Mail completed application, together with your most recent high school or college transcript to:

M.R.S.P.T.
Post Office Box 56425
Washington, D. C. 20040-6425

Please direct any inquiries to: thelasax@mrspt.org

**MILITARY ROAD SCHOOL
DONNESSA LUCAS MEMORIAL SCHOLARSHIP FUND AWARD
SECOND / THIRD/ FOURTH - YEAR APPLICATION FORM**

Please print all information clearly

Name: _____
(last) (first) (middle initial)

Student ID#: _____

Home Address* _____
(street address or P. O. Box No.)

_____ *(city) (state) (zip code)*

Home Telephone No. (____) _____ Alternate No.(____) _____

Email address: _____ Date of birth: ____/____/____

Name of college you plan to attend or are attending: _____

Address of college* _____
(street address)

_____ *(city, state & zip code)*

Declared Major: _____ Declared Minor: _____

Current grade point average: _____

Describe use of 2016-2017 Scholarship Award: _____

Names, contact information and relationship of three references not related to you (**please include one current professor in your major field of study**):

1. _____

2. _____

3. _____

** Applicant must be a permanent resident of the Washington, D.C. Metropolitan area and attend an accredited college or university located within the continental United States.*

**MILITARY ROAD SCHOOL
DONNESSA LUCAS MEMORIAL SCHOLARSHIP FUND AWARD
SECOND / THIRD/ FOURTH - YEAR APPLICATION FORM**

Please print all information clearly

List school-related activities (athletics, clubs, music programs, year book staff, etc.):

List academic honors (National Honor Society, Honor Roll, etc.):

List your leadership role(s) in the activities that you noted above (i.e.; President, VP, Treasurer, Secretary, Captain, etc.):

List community-related activities, work with charity organizations, any volunteer service, and any MRSPT programs, activities or events which you have attended or participated in:

Additional information you would like to have considered:

Applicant's Signature _____ ***Date:*** _____

Mail completed application, together with your most recent transcript to:

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Please direct any inquiries to: thelasax@mrspt.org