

 **MAINE ASSOCIATION OF BROADCASTERS**

 **STUDENT BROADCASTER SCHOLARSHIP PROGRAM**

**GENERAL INTENT:** The Maine Association of Broadcasters believes that the future of our industry lies with

our young people—and providing an incentive for Maine students to pursue educational opportunities in the

fields of broadcasting, audio/video production, digital arts, certain engineering fields and related courses of study will enhance that objective.

**WHO SHOULD APPLY FOR AN MAB SCHOLARSHIP?:** Students who are permanent residents of Maine, have declared a communications-related major and are in the process of enrolling or are currently enrolled at an accredited institution are encouraged to apply for a **$2,000 Scholarship**. Such institutions include vocational schools, 2 or 4-year colleges or universities offering degrees in radio and/or television broadcasting, audio/video production, digital arts/web design, engineering fields with potential broadcast application and other fields which may prepare students for broadcast station employment. The school does not need to be within Maine.

**HOW WILL RECIPIENTS BE SELECTED?:** The Maine Association of Broadcasters Board of Directors will select all Scholarship Award winners based on the recommendation of the MAB Scholarship Committee, based on factors such as financial needs, academic merit, community service, work experience and the satisfaction of requirements for areas of study. The number of Scholarships awarded will vary from year to year, based on the Yearly Financial Budget of the Association. The MAB reserves the right to either increase or decrease the number of scholarships awarded based on the caliber of the applications received.

**HOW AND WHEN ARE AWARDS DISTRIBUTED?**: Scholarship payments will be made payable to both the student and the school and will be awarded in time for the Active Year’s Fall Semester. Students receiving a scholarship will be contacted and a check presentation will be arranged. The MAB reserves the right to withdraw the award if the circumstances of the student have changed from the time of application to the time of the award, pertinent to the selection criteria outlined above.

**WHAT IS THE APPLICATION PROCESS?:** Please complete the Application and return to the Maine Association of Broadcasters by **6/30/2025**. Email to: **tmoore@mab.org** **or Mail to: Maine Association of Broadcasters,**

**91 Auburn Street Suite J #1150, Portland, ME 04103**

Applications that are late or incomplete will not be considered.

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**STUDENT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **FIRST MIDDLE LAST**

**MAILING ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **STREET/P.O. BOX CITY**

 **\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **STATE ZIP CODE**

**NON-SCHOOL EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_**

**I AM A: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **HIGH SCHOOL SENIOR UNDERGRADUATE STUDENT GRADUATE STUDENT**

**HIGH SCHOOL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADUATION DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **NAME CITY STATE mm/yy**

**SCHOOL YOU PLAN TO ATTEND IN THE FALL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **NAME CITY STATE**

**ANTICIPATED GRADUATION DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **mm/yy**

**MY SCHOOL IS A: \_\_\_\_\_ 4-YEAR COLLEGE/UNIVERSITY \_\_\_\_ 2-YEAR COLLEGE \_\_\_\_\_VOCATIONAL SCHOOL**

**I WILL BE A: \_\_\_FRESHMAN \_\_\_\_SOPHOMORE \_\_\_\_JUNIOR \_\_\_\_\_\_SENIOR**

**DECLARED MAJOR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ACTIVITIES: (LIST COMMUNITY AND SCHOOL ACTIVITIES IN WHICH YOU PARTICIPATED. INCLUDE SPORTS, STUDENT GOVERNMENT, VOLUNTEER AND COMMUNITY PROJECTS-ATTACH ADDITIONAL DOCUMENTS IF NEEDED)**

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 **WORK EXPERIENCE (OR ATTACH RESUME)**

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**BRIEFLY STATE WHY YOU HAVE CHOSEN A CAREER IN BROADCASTING**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WHAT DO YOU SEE AS THE SINGLE GREATEST OPPORTUNITY IN FRONT OF THE BROADCAST RADIO OR TELEVISION INDUSTRY—AND WHAT WOULD YOU DO TO TAKE ADVANTAGE OF IT? (ATTACHE ADDITIONAL SHEETS IF NEEDED)**

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**HIGH SCHOOL STUDENTS ONLY**

**TO BE FILLED OUT BY A HIGH SCHOOL OFFICIAL**

**STUDENT RANK\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IN A CLASS OF (SIZE)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CUMULATIVE G.P.A. \_\_\_\_\_\_\_\_\_\_\_\_\_ SCALE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PSAT/SAT: READING/WRITING\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MATH\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HIGH SCHOOL OFFICIAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TITLE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **DATE**

**ALL APPLICANTS MUST PROVIDE TRANSCRIPT AND FILL OUT FINANCIAL INFORMATION**

**TRANSCRIPT**

If you are a graduating high school senior or have never enrolled in college, you must include a high school transcript.

If you are enrolled-or have ever been enrolled as a college student, please include your most recent college transcript. The transcript need not be an official copy, but it must be cumulative and show most recently completed study. TRANSCRPTS MUST BE INCLUDED WTH APPLICATION.

**FAMILY FINANCIAL STATEMENT**

If you are a dependent student, please have your parents complete the PARENT INFORMATION section using the information from their most recent IRS Tax Return. Independent students and dependent students must complete the STUDENT INFORMATION section with information from your most recent IRS Tax Return. You are a dependent student if you are under 24 years of age.

**PARENT INFORMATION STUDENT INFORMATION**

**ADJUSTED GROSS INCOME $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ADJUSTED GROSS INCOME $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL U.S. INCOME TAX PAID $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOTAL U.S. INCOME TAX PAID $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL NUMBER OF FAMILY MEMBERS \_\_\_\_\_\_\_\_\_\_\_ TOTAL NUMBER OF FAMILY MEMBERS \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL NUMBER OF IMMEDIATE FAMILY MEMBERS ATTENDING COLLEGE DURING NEXT ACADEMIC YEAR \_\_\_\_\_\_\_\_**

**DESCRIBE PERSONAL OR FAMILY CIRCUMSTANCES THAT MAKE IT NECESSARY FOR YOU TO SEEK AID FOR YOUR EDUCATION (ATTACH ADDITIONAL DOCUMENTS IF NEEDED)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CERTIFICATION**

I certify that the information on this form is true and complete to the best of my knowledge. If asked by any representative of the MAB, I agree to give documentation for information supplied on this form. I understand that the MAB will consider all financial information confidential

**APPLICANT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**