

2024 APPLICATION FORM for THE NEW BREMEN GERMAN TOWNSHIP FIRE DEPARTMENT MEMORIAL SCHOLARSHIP

The NBFD will make available <u>three</u> Memorial Scholarships to 2024 New Bremen High School graduates. Each scholarship will be **\$1,000**!

The NBFD wishes to award the scholarships to graduates pursuing a career in public service or have shown efforts toward public service or have a parent or sibling who has provided public service (Firefighter, EMS, or Police). Applicants must complete either section 3A or 3B to be considered. We will accept applications submitted by April 29th 2024. NBFD Scholarship Committee has final decision for award selection and approval. The scholarship awardees will need to provide written proof of enrollment to their educational institution listed on the application to receive their check.

Please mail completed applications to: NBFD Scholarship

c/o Ben Wissman 126 St. Clair Pl. New Bremen, OH 45869

Or Email to: benwissman@gmail.com

This scholarship is being awarded to honor the Fallen Firefighters and other emergency service and law enforcement members who have given their time to serve the public.



Please complete all relevant sections.

| 1. | Name: | |
|----|---|------------|
| 2. | Address: | |
| 3. | A. I am planning to pursue an education in an emergency service or law enforcements | nent caree |
| | Name of school: | |
| | Location | |
| | Degree you will pursue: | |
| | B. If not pursuing an emergency service or law enforcement career, what career a planning and what school: | re you |
| | Name of school: | |
| | Location | |
| | Degree you will pursue: | |
| | (Applicant must complete either section A or B above to be considered) | |
| 4. | I have a family member (parent or sibling) that is currently, or has in the past, serve emergency services or law enforcement. (Fulltime or Volunteer service in Police, EMS) | |
| | Name of family member and relation: | |
| | Organization served: | _ |
| | Contact at organization to verify service: | |
| | Name: Tel: | |

| and other volumeet community | I have shown efforts of public services by participating in the following organization(s project(s): (Examples: Scouting, Church groups, Big Sister/Brother, Holiday Food Driand other volunteer community/public service activities.) | | | |
|---|--|--|--|--|
| Organization(s) served or Project(s): | | | | |
| | · | | | |
| | | | | |
| Please provide a contact to verify public service(s): | | | | |
| Name: | Tel: | | | |
| Name: | Tel: | | | |
| Name: | Tel: | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| Authorization. | | | | | |
|---|----------------------------------|--|--|--|--|
| I am a 2024 graduating senior at New Bremen High submitted is correct at the time of application. | School. I attest the information | | | | |
| Applicant's signature: | Date: | | | | |
| Parent's Signature: | Date: | | | | |
| Parent's Printed Name: | | | | | |
| Verification signed by NBHS Guidance Counselor: | | | | | |
| Signature: | Date: | | | | |
| This application must be completed and returned to: | | | | | |
| NBFD Scholarship c/o Ben Wissman 126 St. Clair Pl. New Bremen, OH 45869 | | | | | |
| OR emailed to: | | | | | |

benwissman@gmail.com

7.