



The Richard Garner Memorial Scholarship

Scholarship Overview

The Richard Garner Memorial Scholarship was created to honor the life of City of Madison Firefighter/Paramedic Richard Garner Jr. who died in the line of duty on April 1, 2018. Richard was not only a great Firefighter/Paramedic and a dear friend to many, but he was a constant fixture within the Madison community, helping and serving in any way he could. The scholarship was put in place to help those who are entering the Fire and EMS fields.

ELIGIBILITY REQUIREMENTS

1. High School Diploma
2. High School or College GPA of 3.0, or 2.5 with a history of volunteering in the community.
3. Acceptance or currently enrolled at a College for Fire or EMS related studies.
4. Copy of High School and/or College Transcripts
5. Three letters of recommendation must be submitted with application.
6. Essay on why you are applying for the Richard Garner Memorial Scholarship and what qualities/attributes may set you apart from other applicants.

Scholarship Guidelines

1. The scholarship application is open from **January 1st** to **June 15th** every year.
2. Each applicant is eligible for one scholarship per academic school year.
3. Awards will be granted directly to the bursar's office of the educational institution.
4. Each applicant must complete a formal interview (in person) with the Richard Garner Memorial Committee.
5. Two scholarships will be rewarded each year, with each scholarship totaling \$2,500.
6. Each scholarship application must be electronically sent to jgangler@local311.org .

*****For questions regarding the Richard Garner Memorial Scholarship contact Joe Gangler, of the Richard Garner Memorial Committee, at jgangler@local311.org*****

RICHARD GARNER MEMORIAL SCHOLARSHIP APPLICATION

ACADEMIC AND GENERAL INFORMATION

PERSONAL INFORMATION:

Applicant Name: _____
(Last) (First) (Middle) (Suffix)

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ - _____ - _____

Email: _____

ACADEMIC INFORMATION:

High School: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone Number: _____ - _____ - _____

Final Accumulative GPA: _____ Date of Graduation: _____

Date of GED/HSED Certification: _____
(A copy of your high school transcript must be attached to this application form for scholarship consideration)

POST-SECONDARY EDUCATION INFORMATION:

Institution Accepted to: _____

Degree Program Enrolled In: _____

Address of Institution: _____

City: _____ State: _____ Zip Code: _____ Phone Number: _____ - _____ - _____

Semester you are applying for the scholarship – Please check one: **Fall**, _____: **Spring**, _____:

I plan to attend: Full Time: _____ Part Time: _____

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COMMUNITY AND EXTRACURRICULAR ACTIVITIES

Please list extracurricular high school activities you have participated in:

Please list extracurricular college activities you have participated in:

Please list extracurricular community activities you have participated in:

EACH APPLICANT MUST ATTACH:

****Letters of Recommendation:***

Minimum of three with at least one from an academic setting Ex. High school counselor, teacher, college professor, etc. Please include name, address and phone number for each reference.

****Narrative of why you want the Richard Garner Memorial Scholarship:***

Must be at least one page in length and no more than two.

Richard Garner Memorial Scholarship Application Form

Family and Financial Information

Family Information:

Are you a single Parent? _____ Yes _____ No

Do you live with your parents? _____ Yes _____ No

Do you live on your own? _____ Yes _____ No

Number of people in your family (Number includes Applicant): _____

What is your race/ethnic heritage? (check one or any combination)

_____ American Indian or Alaskan Native _____ Asian or Pacific Islander

_____ Black, not of Hispanic origin _____ Hispanic

_____ White, not of Hispanic origin

_____ Other (Please Explain)

Financial Information:

Place of Employment: _____

Address: _____ City: _____ State: _____ Zip: _____

Name of Supervisor: _____ Phone: () _____

I am Currently working: _____ Full-time _____ Part-time

Do you plan to work while attending school? _____ Yes _____ No

If yes, please check one: _____ Full-time _____ Part-time

Please check your household income for past year:

_____ \$0 - \$9,000 _____ \$21,000 - \$27,000

_____ \$9,000 - \$15,000 _____ \$27,000 and above

_____ \$15,000 - \$21,000

Do you have any unusual financial hardships that you feel should be considered? (Please explain): _____

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Applicant Name: _____
(Last) (First) (Middle)

Date of Application: _____

I, _____, understand that should I be selected for the
(Applicant Name – Please Print)

Richard Garner Memorial Scholarship, this money will be used to meet my educational expenses only. I authorize Firefighters Local 311 and the Richard Garner Memorial Committee., to have access to all information related to my eligibility for this award. I understand that should any information on this application be found to be misleading or fraudulent, I automatically forfeit the scholarship. The Richard Garner Memorial Committee and Firefighters Local 311 may use my name and likeness in news releases, social media and websites belonging to and associated with The Richard Garner Memorial Committee and Ride if I am selected for an award. I also understand that the selection of a scholarship recipient is at the discretion of the Richard Garner Memorial Committee or its designee.

Applicant Signature: _____

Date: _____

SCHOLARSHIP DEADLINE: **June 15th**

FOR COMMITTEE USE ONLY: