

2021 MEDEA SCHOLARSHIP
Maine Driver Education Association

Purpose

Offer two \$500 scholarships to encourage and assist young people of Maine to start a post secondary education in any field: vocational, technical, or academic. One scholarship for any resident of Maine and a second scholarship for MEDEA member's family.

Qualifications

1. One scholarship for a first year (freshman) full time student. This student must have been instructed in driver education by an instructor that was a member of MEDEA at the time of the driver education course. The name of the driving school and instructor is required.
2. A second scholarship for any MEDEA family member entering any academic year. The name of the family member and affiliated driving school is required. Please note your relationship to the MEDEA member.
3. Be a resident of Maine at the time of application.
4. Include a photocopy of the top half of your blue Course Completion Certificate/Temporary Permit..
5. Write a 300 word essay with the following prompt.

How do you see legalizing recreational marijuana has affected driving conditions today?

Deadline

Send application & essay to:

Beal Driving Academy

Attention Felicia

99 Farm Road

Bangor, ME 04401

Postmarked by January 31, 2021

Payment

The scholarship winner(s) will be announced by the MEDEA scholarship committee directly to the student. Announcements may also appear in a newspaper, MEDEA website, and student's high school graduation program. Payment will be made directly to the applicant's post secondary school after MEDEA has received a letter from the post secondary school verifying the applicant is enrolled in the fall semester.

The scholarship committee's decision is final.

Contact Felicia at felicia@bealdrivingacademy.com with any questions.

MEDEA SCHOLARSHIP APPLICATION
Maine Driver Education Association

Name: _____ Date of Birth _____

Email Address _____ Phone Number _____

Mailing Address
Street _____ City _____ State _____ Zip Code _____

Select one and complete the appropriate information.

() First year full time student

Name of Driving School _____

Name of Instructor _____ Date Completed Driver Ed _____

() MEDEA Family Member

MEDEA Member's Name _____ Relationship _____

High School Information

Name: _____ Phone Number _____

Mailing Address
Street _____ City _____ State _____ Zip Code _____

Post Secondary School Information

Name _____

Address
Street _____ City _____ State _____ Zip Code _____

Select one and complete the appropriate information.

() I have been accepted.

() I expect to hear if I have been accepted by _____ (date) and will let you know.

() I am already enrolled and will be in my _____ (number) year in the fall of 2021 (MEDEA family member).