

## East Metro Association of REALTORS® Foundation

501 NE Hood Ave., Suite 210

Gresham, OR 97030-7325

Phone: 503-667-1211 \*\* Fax: 503-492-2323

### *2019 EMAR Foundation Family Scholarship*

The East Metro Association of REALTORS® Foundation takes great pleasure in being able to offer a total of **two scholarships** for children or grandchildren of EMAR Members. We recognize that our youth of today are our future and we take pride in being able to offer a total of scholarships in the amounts of \$2,000.00 and \$1,500. The 2019 EMAR Foundation Scholarship Committee looks forward to receiving your application.

#### **Requirements:**

1. Must be either a child or grandchild of a current EMAR member (REALTOR®, Appraiser, or Affiliate)
2. Must be on track to graduate from high school in the current school year (there are no limitations as to which high school the student currently attends)
3. Must have a minimum 3.25 cumulative GPA

#### **Criteria for selection:**

- School achievements, awards, and/or organizational involvement
- Community, civic or church activities, or hobbies
- An essay (1 page, typed and double-spaced) on personal or professional goals
- Personal interview

#### **Application Process:**

1. Complete the EMAR Family Scholarship application
2. **Return the Application and a copy of your High School transcript to the EMAR Office no later than 5:00pm on Friday, April 26, 2019**
3. Scholarship finalists will be called by May 1<sup>st</sup> to schedule an interview
4. Interviews will be scheduled with the finalists starting at 3:00 pm for the afternoon of Friday, May 3<sup>rd</sup> at the EMAR Office (501 NE Hood Ave., Suite 210, Gresham, OR 97030).
5. The Winners will be notified no later than May 7<sup>th</sup>
6. Recipients of the Scholarships will be honored during our EMAR Luncheon on Wednesday, May 15, 2019 held at the Mojave Grill (77 NE 4<sup>th</sup> St · Gresham)

Lunch will be provided for the recipient and up to two of their guests (suggested - 2 family members). Additional guests may attend for \$16.00 per person.

The entire amount of the scholarship is to be paid directly to the college of the student's choice and is to be used within four (4) years. If not used, the funds will be returned to the EMAR Foundation General Fund.

If you have questions, please contact Beverly Lombardo, Interim Executive Director by phone at 503-667-1211 or email [ae@emaroregon.com](mailto:ae@emaroregon.com).

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## 2019 EMAR FAMILY SCHOLARSHIP APPLICATION FORM

**To be submitted to the EMAR Office no later than 5:00 p.m. on Friday, April 26, 2019**

NOTE: If your child or grandchild is awarded a 2019 EMAR Scholarship given through Centennial, Sam Barlow, or Sandy High Schools, s/he is ineligible to receive an EMAR Family Scholarship. In other words, s/he cannot receive two scholarships from the Foundation. However, applications can be made both through the named high schools and for the EMAR Family scholarship to maximize the possibility of receiving a scholarship award.

**IMPORTANT! Copies (black & white) of the Application Packets for each Candidate will be made for each of our Committee Members. To allow for ease of copying, ALL pages must be on white, 8 ½ x 11 paper and must be single sided. PLEASE do not use staples, glue, bindings, presentation folders, document protectors, etc. Do not include photos unless they are B&W copies on paper. Your application packet with supporting documents should be held together by a single document clip.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_  
(please include your City and Zip)

Parent/Grandparent that is a current EMAR Member: \_\_\_\_\_

Parent/Grandparent Phone: \_\_\_\_\_

What High School do you attend? \_\_\_\_\_

How long have you attended? \_\_\_\_\_

For what type of vocation do you wish to prepare?

\_\_\_\_\_  
\_\_\_\_\_

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What school or college do you plan to attend?

1st choice \_\_\_\_\_

2<sup>nd</sup> choice \_\_\_\_\_

3<sup>rd</sup> choice \_\_\_\_\_

What have you done to help yourself financially in the past 3 years?

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*Please answer the following questions here or on separate sheets of paper:*

1. School organizations or teams to which you have belonged:

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2. Community service:

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3. Office(s) held and/or awards or recognitions earned:

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4. Grade point average (Please include a copy of your academic record.)

5. Is there any additional information you would like us to consider in evaluating your application for this scholarship?

6. Using a maximum of 1 double-spaced, typed page, state your goals, personal ambitions, and what you wish to do with your education after graduation. (Include with application.)

Signature \_\_\_\_\_ Date