Automotive Hall of Fame Scholarships

Click here to download the Scholarship Application

The program has specific scholarships for incoming freshmen and upper-level undergraduate students. All of the scholarships are based on financial needs and with the usual minimum GPA requirement of 3.0.

To be eligible for a scholarship you must:

- Submit a completed application form indicating a sincere interest in an automotive career.
- Provide an official transcript of all academic work.
- Submit two letters of recommendation supporting your automotive interests.
- Submit a letter of acceptance for an associate, bachelor, or masters program.
- Be accepted at an accredited college, university or trade school within the United States at the time of application.
- Students attending a technical training school may also apply (trade school should equal a two-year associate program).
- Student must be a United States citizen or in the United States on a Student Visa.
- Must be enrolled full-time.
- Must have 3.0 GPA or higher.

Interested students can download the application and send to:

Award and Scholarship Programs
Automotive Hall of Fame
21400 Oakwood Blvd.
Dearborn, MI 48124
313- 240-4000

Please send an email to bchapin@thedrivingspirit.org with any questions or comments concerning scholarship applications.

Entries must be postmarked each year by June 1.

Faxes not accepted.

Recipients only will be contacted by August regarding the details of their scholarship.

Scholarship checks are sent to the schools in August and are to be used for tuition and lab fees for that calendar year.
Scholarship Application  
(Application must be filled out completely)  
(Applications will be accepted January 1 – June 1)

Type or Print Clearly

General Information

Name: ____________________________
Home Address: ____________________________
College Address: ____________________________
Telephone (home): ____________________________  (school): ____________________________
Date of Birth: ___________  Age: ___________  Gender: ______ M ______ F
Email Address: ____________________________

Academic Information

Name of college, university or trade school you will be attending:

____________________________________________________
Complete address of Financial Aid Office at college, university or trade school:

____________________________________________________

Type of Program: (check one)
______ Associate  ____ Bachelor  ____ Masters  ____ Trade

Current Standing: (check one)
______ High School Senior  ____ College Freshman  ____ College Sophomore  
______ College Junior  ____ College Senior  ____ College Graduate

College Hours Completed: ______  Expected Date of College Graduation: ______

Major: ____________________________  Current GPA: ____________________________
(Must be filled in)  (High School or College, whichever is applicable)
Estimated Education Expenses Per Year

Tuition & Labs: ____________________ Room & Board: ____________________

Books: ____________________ Other: ____________________

**TOTAL ESTIMATED EDUCATION EXPENSES PER YEAR:** ____________________

Where do you plan to live? (check one) ___ Home ___ On campus ___ Off campus

Do you plan to work during the academic year? (check one) ___ Yes ___ No

Estimated Financial Assistance

What is the student's taxable income for the most recent tax year? ____________________

Do you receive Social Security benefits? (check one) ___ Yes ___ No

If so, how much? ____________________

Do you receive Veteran's educational benefits? (check one) ___ Yes ___ No

If so, how much? ____________________

Do you receive any other scholarship, grant, fellowship, loan, or financial assistance? (check one) ___ Yes ___ No

If so, what is the total amount of such assistance? ____________________

Demonstrated Financial Need

Will any person other than yourself claim you as an exemption for income tax purposes? ___ Yes ___ No

If yes, combined annual income of such person(s): ____________________

If yes, will you receive more than $750 worth of support from such person(s)? ___ Yes ___ No

Number of siblings who will be attending college during the year in which you are applying: ________

Career Goals

On a separate piece of paper, write a brief explanation of your career goals and objectives for the next five years.

Eligibility

To be eligible for a scholarship from the Automotive Educational Fund you must:

1. Submit a completed application form indicating a sincere interest in an automotive career.
2. Provide an **Official** transcript of all academic work.
3. Submit two letters of recommendation supporting your automotive interests.
4. Submit a letter of acceptance for an associate, bachelor or masters program.
5. Must be accepted at an accredited college, university or trade school within the United States at the time of application (trade school should equal a two-year associate program).
6. Student must be a United States citizen or in the United States on a Student Visa.
7. Must be enrolled full-time.
8. Must have a **3.0 GPA** or higher.

**Certification**
I certify that the information provided is true and complete. I understand that false or incomplete information may result in forfeiture of eligibility or scholarship, if selected.

Signature: ___________________________ Date: ___________________________

Return complete application and supporting material postmarked by June 1, to:

**Automotive Hall of Fame**
**Scholarship Programs**
21400 Oakwood Boulevard
Dearborn, Michigan 48124

*For additional information call: 313.240.4000*