



Gene R. O'Brien Memorial Scholarship Application

Applicant Contact Information:

Date: _____

Name: _____		
Address: _____		
Age: ____	Phone: _____	Email Address _____

If applicant is under 18, **Parent/Guardian Contact Information:**

Name: _____	
Phone: _____	Email Address _____

Applicant Current and Intended Educational Information:

High School / Address: _____

GPA: _____ FRC Team Number / Name: _____ Years on team: _____

Intended Educational Organization (if known) _____

Mentor Attestation:

I, _____, attest that _____ (student's name) has been a member in good standing of FMA FRC Team # _____ for at least 1 year.
Mentor Signature: _____

I have read and hereby accept the conditions, rules, and regulations outlined in the description of this scholarship and agree to accept the Committee's decisions as final. Furthermore, I attest that the essay attached to this application is solely the work of the applicant and does not unduly leverage any third party support including, but not limited to, generative text tools such as ChatGPT.

I further understand that if I have not enrolled in an accredited educational institution and provided the information concerning how scholarship funds can be dispersed to that organization to the Mid-Atlantic Robotics Treasurer within one (1) year of receiving the scholarship, I will have forfeited all claims to said scholarship.

Student's Signature

(if under 18) Parent/Guardian's Signature

Our mission is to inspire the students in our geographic area to pursue educational opportunities leading to careers in science, technology, engineering and mathematics by engaging them in mentor-based programs that inspire innovation and creativity, build skills through hands-on participation, and promote inclusivity, cooperation and professionalism.
