

# MAGE Scholarship and Student Debt Reduction Program

## Information – Eligibility and Rules

### General Information:

The number of MAGE Scholarships/Student Debt Reduction payments to be awarded will be based on available funds in the scholarship/student debt reductions fund. Scholarships awards are \$1,000, payable to the scholarship winners. Student Debt reduction payments of \$1,000 will be made to the financial institution to which the member owes the debt. Applications are open to active, not retired members in good standing, and their children, stepchildren, legally adopted child, or legal ward of the member. All applicants must meet the eligibility requirements and comply with the rules and regulations as established by the MAGE Board of Directors.

### Eligibility:

1. An applicant must be an active (not retired) member of MAGE, or the son, daughter, stepchild, legally adopted child or legal ward of an active member who is in good standing and has been a member for 1 year prior to the application period.
2. The member must be active and in good standing on the date of the payment of the award.
3. Scholarship applicants must be a High School senior or High School graduate or presently enrolled in a college university or recognized technical or vocational post-secondary school as a full or part time student with at least 6 credit hours. You must provide a copy of the confirmation of college/technical school enrollment and classes registered for with the application form
4. Student debt reduction applicants must have at least \$10,000 in current student debt and provide a statement showing the debt and payment information.
5. Student debt reduction applications MUST provide the institution and the proper mailing address of where the payment should be sent.
6. Applicants are eligible to receive one award for either a scholarship or student debt reduction and must not have received either of these awards previously.

### Application Forms:

Application forms shall be available on the MAGE website at [www.mage.org](http://www.mage.org) or may be sent to you by writing the MAGE office at 6920 S. Cedar, Suite 7, Lansing MI 48911 or calling 1-800-477-6243 to request a form. The application period shall be June through last weekday of August each year. Applications received after 5 p.m. on the last weekday of August are not timely and not eligible.

Please take care to fill out the application form completely and legibly as those that are not legible may not be considered.

### SCHOLARSHIP/STUDENT DEBT REDUCTION AWARD SELECTION:

All applications will be entered into a drawing and winners will be selected randomly from all entries.

**MAGE SCHOLARSHIP APPLICATION FORM**

Application Deadline is 5:00 p.m. on the last weekday of August each year.

Applicant Full Name \_\_\_\_\_

Applicant's Relationship to MAGE Member \_\_\_\_\_

Applicant's Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's Student ID Number \_\_\_\_\_ Telephone \_\_\_\_\_

Applicant's College, University or Technical School \_\_\_\_\_

Address of school attending \_\_\_\_\_

Enrolled for \_\_\_\_\_ (number of credit hours) Email address: \_\_\_\_\_

Signature \_\_\_\_\_

**Applicant must provide a copy of the confirmation of college/technical school enrollment and classes registered for with the application form.**

MAGE Member Full Name \_\_\_\_\_

MAGE Member Address, \_\_\_\_\_

MAGE Member City, State & Zip \_\_\_\_\_

MAGE Member Employee ID \_\_\_\_\_ MAGE District Number \_\_\_\_\_

MAGE Member **HOME** email \_\_\_\_\_

MAGE Member Telephone number(s) \_\_\_\_\_

Mail or Fax by 5:00 p.m. on the last weekday of August to:

**MAGE – OPEIU Local 2002  
6920 S. Cedar Suite 7  
Lansing MI 48911  
Fax – 517-694-8250**

**MAGE STUDENT DEBT REDUCTION APPLICATION FORM**

Application Deadline is 5:00 p.m. on the last weekday of August each year.

Applicant Full Name \_\_\_\_\_

Applicant's Relationship to MAGE Member \_\_\_\_\_

Applicant's Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's Student ID Number \_\_\_\_\_ Telephone \_\_\_\_\_

Email address: \_\_\_\_\_ Loan Balance \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Account Number: \_\_\_\_\_

Check to be addressed to: \_\_\_\_\_

Signature \_\_\_\_\_

**Applicant must provide a copy of the CURRENT student debt over \$10,000, and must include the payment address information with the application form.**

MAGE Member Full Name \_\_\_\_\_

MAGE Member Address, \_\_\_\_\_

MAGE Member City, State & Zip \_\_\_\_\_

MAGE Member Employee ID \_\_\_\_\_ MAGE District Number \_\_\_\_\_

MAGE Member **HOME** email \_\_\_\_\_

MAGE Member Telephone number(s) \_\_\_\_\_

Mail or Fax by 5:00 p.m. on the last weekday of August to:

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