



## Scholarship

Atlantic Insurance Group LLC is awarding two \$1,000 scholarships to high school graduates who are committed to attending an accredited institution of higher learning. We believe in the growth and development of the next generation and want to invest their future. This is another way we want to *Insure your Future*. Please complete and return the following application by April 1<sup>st</sup> to Attn: Stephen Milwicz. The awarded recipients will be decided by May 1<sup>st</sup>. The awarded check will be made out and sent directly to the attending Institution

*From everyone who has been given much, much will be required, and from the one who has been entrusted with much, even more will be asked. Luke 12:48*

**Applicants Information**

Name Of Policyholder(s) \_\_\_\_\_ Policy #: \_\_\_\_\_

\_\_\_\_\_ Policy #: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**Education Information**

Name of High School: \_\_\_\_\_  
City State Zip

Year Graduated: \_\_\_\_\_ GPA: \_\_\_\_\_

**References**

1<sup>st</sup> Reference  
Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

2<sup>nd</sup> Reference  
Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Please attach the answers to these questions on a separate sheet(s).

- Share with us the institution you plan on attending, your intended major/field of study and your anticipated degree/certification you are seeking. Why did you choose this field and this institution?
- What impact do you hope to have on the community once you have completed your coursework?
- What do you see yourself doing in 10 years?

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*The above information will remain confidential and will not be used for any other purpose than determining eligibility.*