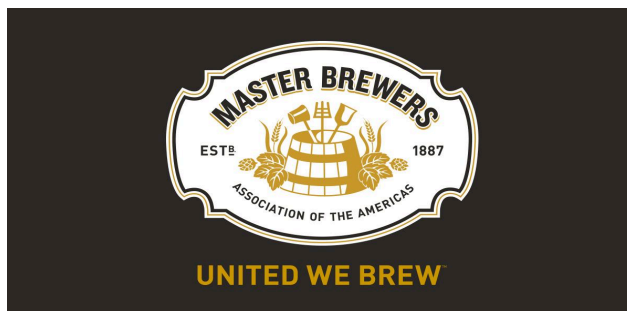


MBAA DISTRICT MILWAUKEE



Scholarship Application

A) Personal Information:

Name_____

Address_____

Phone_____

Email_____

MBAA Member Number_____

B) Course Selection (MBAA Packaging Technology, MBAA Malting and Brewing Science, MBAA Brewery Maintenance Systems, or other*):

*If you are asking for a scholarship to a non-MBAA course/class/certificate, please provide the following:

Name of Host Organization_____

Name of Class/Course/Certificate

Program_____

Brief Description of Class/Course/Certificate Program

Amount of scholarship being requested_____

Cost of course_____

Link to course website_____

C) Employment:

Current Employer_____

Current Job Title_____

Length of employment_____

Address_____

D) Supervisor

May we contact -Yes or No - Please Circle one

Name (if we can contact)_____

Phone (if we can contact)_____

Email (if we can contact)_____

E) ESSAYS

WORK: Please describe your responsibilities, achievements, and challenges in your current/most recent brewery adjacent position. Please do not include the specific name of your place of employment/business or any person's name. This is in an effort to maintain anonymity during the application review process.

SCHOLARSHIP: Please explain why this scholarship will help you, how you plan to use this scholarship for future endeavors, and why you would be a good candidate for this scholarship. Please do not include the specific name of your place of employment/business or any person's name. This is in an effort to maintain anonymity during the application review process.

Eligible candidates must meet eligibility requirements:

- **The recipient must be a member in good standing with the Master Brewers Association of the Americas and District Milwaukee to receive the award.**
- **The recipient must NOT have received a prior scholarship from District Milwaukee.**

I, _____ have read and understand the conditions of the MBAA MILWAUKEE DISTRICT SCHOLARSHIP as explained in the current Notes to Candidates for Scholarships. I affirm that I plan to pursue a career in the brewing industry, or that I am currently pursuing a career in the brewing industry, as defined in the aforementioned documentation. I understand that this application will be available only to qualified people who need to see it in the course of their duties. If selected as an MBAA Milwaukee Scholar, I agree to attend a MBAA District Milwaukee meeting, and will present at the MBAA Milwaukee meeting. I affirm that this completed application has been written by me. I affirm the information contained herein is true and accurate to the best of my knowledge and belief. I acknowledge that the decision of the scholarship committee is binding and not available to appeal. I may only be awarded one scholarship per four-year period through District Milwaukee and attest I have not received a prior scholarship from District Milwaukee. Depending upon need, the amount of the scholarship may be adjusted. All scholarship funds use must be documented and submitted for review to the President/Secretary of District Milwaukee prior to payment unless other agreement has been reached. All funds must be used within twelve months of award or will be forfeited. Funds may be taxable and are the responsibility of the recipient.

Signature: _____

Date: _____