Central Michigan Veterans Fund Scholarship (CMVF) 2025

Application must be received by 11/15/2025 in your schools Veterans Resource Center

Required qualifications for this award:

- 1. Student must be currently, or previously, eligible for Veterans Administration education entitlement funds. This includes eligible dependents of veterans utilizing VA entitlement fund.
- 2. Students must provide a copy of their current and future class schedule and pursue a degree through Central Michigan University, Mid Michigan College, Alma College, Montcalm Community College, or CMVF approved vocational training.
- 3. Students must provide a copy of DD 214 Member 4 (If Dependent: Copy of Sponsor's DD 214 Member 4) (Sponsor = Parent or Legal Guardian)
- 4. Students must provide a copy of their transcripts (Official or Unofficial) and have a minimum GPA of 2.0 for undergraduate and 3.0 for graduate programs.
- 5. Students must provide a one-page essay on what being in the military means/meant to you OR what your parent's military service means to you if you are a dependent.
- 6. Preference will be given to students who are residents of Isabella, Gratiot, or Montcalm counties.

Name			
Address			
City	State	Zip Code	
Michigan county of residence		VA Educational Entitlement	
	(Chapters 30, 31, 33, 35, o	r 1606– if chapter 33 include your %)	
Phone	Email		
Institution or Training Facility	Degree		
Branch of Service	Dates of Service	Rank	
Military Job Duty S	tationTc	our Location/Year	
In addition to this completed form,	students must also include	::	
A copy of your DD 214. (If applicant is a dependent: Copy of Sponsor's DD 214 Member 4)			
 A copy of transcript indicating current A one-page essay on what being in the 		yhat your parent's military service	
		ication you agree to allow CMVF to use	
your essay (all or in-part) within promo			
Scholarship applicants who are receiving or plan Federal Student Aid (FAFSA) should be advised th been packaged and/or disbursed or federal aid ell is made. Federal Direct Student Loans are conside	at receipt of a scholarship will affect gibility that will be packaged for the s	any federal aid eligibility that has already	
I certify that I have read this form carefully ar	nd that all information submitted is	s true and correct.	
Signature		Date	



Montcalm Community College Release of Information Authorization Form for

Central Michigan Veterans Fund Scholarship (CMVF) 2025 Application

Student Name:
Student ID Number:
Date of Birth:
Purpose of Release:
I, (printed name of student), give my permission for the MCC
Financial Aid Office to release my Central Michigan Veterans Fund Scholarship (CMVF) 2025 scholarship application and any personal information that I have submitted for the application, including academic records, financial aid information, DD 214, and personal statements, to the Central Michigan University Veteran' Resource Center of Mt. Pleasant, Michigan for the purpose of scholarship consideration.
Authorization:
I understand that this information is protected under the Family Educational Rights and
Privacy Act (FERPA) and will only be released with my written consent. I understand that I may revoke this authorization at any time by submitting a written request.
Student Signature:
Date:
MCC Financial Aid Office Use Only:
Received by:
Date Processed: