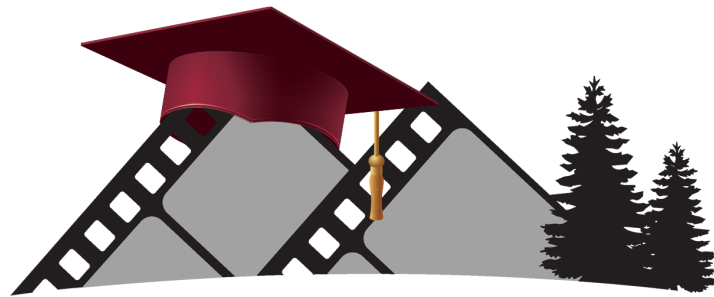


Ask your manager about  
**2019 SCHOLARSHIP AWARDS**  
from



Rocky Mountain



**APPLICATIONS AVAILABLE NOW!**

Application available for download at  
<http://rmnato.com/rmnato-scholarship-fund/>

**All applications must be postmarked  
by December 2, 2019 Deadline**

Scholarship Application and all Supporting Paperwork must be postmarked by December 2, 2019. No exceptions.

*Dear Applicant,*

*Thank you for your interest in the Rocky Mountain NATO Scholarship Program! Following are the details for submitting the paperwork. We look forward to reviewing your application!*

*Best Wishes to all Applicants,  
Rocky Mountain NATO Scholarship Committee*

**ELIGIBILITY**

- Any person who is a high school senior or college student,

**AND**

- has been employed for at least six months by a motion picture theatre who is an RMNATO Member in good standing with current year's dues paid in full,
- **OR** is a child of a theatre owner who is an RMNATO Member in good standing with current year's dues paid in full.

**HOW TO APPLY**

**Complete APPLICATION FORM and SUPPORTING PAPERWORK,  
and mail to:**

Rocky Mountain NATO  
c/o Scholarship  
PO Box 8595  
Spokane, WA 99203

**Or email to:**

[scholarship@rmnato.com](mailto:scholarship@rmnato.com)

**\*\*\* NOTE: You may contact Diane Eve (509.993.3583 / [regional.director@rmnato.com](mailto:regional.director@rmnato.com)) if you do not receive a RECEIPT OF SCHOLARSHIP APPLICATION notice via email on or before January 10, 2020.**

**The following items are mandatory and must be submitted:**

**SCHOLARSHIP APPLICATION:**

- 1) APPLICATION must be completely filled out. Incomplete applications not accepted.

**SUPPORTING PAPERWORK:**

- 2) ESSAY QUESTION, answered in 400-500 words or less, type-written only.
- 3) LETTER OF REFERENCE, from your theatre manager.
- 4) Proof of SAT or ACT testing score.
- 5) Proof of GPA, from last school attended.

Scholarship Application and all Supporting Paperwork must be postmarked by December 2, 2019. No exceptions.

**AWARD NOTIFICATION**

Scholarship award recipients will be notified by mail on or before January 10, 2020.

**AWARD INFORMATION**

- 1) Two (2) scholarships, in the amount of \$500.00 each will be offered in 2019. Scholarship awards, upon proof of enrollment at the student's school of choice, will be payable to award recipient AND Institution (College/University or Trade School), for use for tuition or other expenses at the discretion of the Institution.
- 2) A committee of Rocky Mountain NATO (RMNATO) members will choose the award recipients on the basis of financial need, theatre employment service, school record and civic participation.
- 3) Award Recipient must enroll in a College, University or Trade School for the full term and must meet all qualifications for the school of their choice. If an Award Recipient does not attend college in September/Fall Semester, the award will go to the next highest scoring applicant.
- 4) These scholarships are not affected by any other scholarship(s) earned by the applicant.

## 2019 Rocky Mountain NATO -- SCHOLARSHIP APPLICATION

All questions must be answered. No exceptions.

DATE: \_\_\_\_\_

FULL NAME (first, middle, last): \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

THEATRE NAME YOU ARE EMPLOYED BY: \_\_\_\_\_

ADDRESS OF THEATRE: \_\_\_\_\_

MANAGER NAME & PHONE #: \_\_\_\_\_

POSITION AT THEATRE: \_\_\_\_\_

# OF YEARS/MONTHS EMPLOYED HERE: \_\_\_\_\_ Years \_\_\_\_\_ Months

Do you have experience at other theatres? \_\_\_\_ NO \_\_\_\_ YES If you marked YES, please describe your work experience at other theatres.

CURRENT/GRADUATING HIGH SCHOOL:

\_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

MOTHER'S MAILING ADDRESS: \_\_\_\_\_

MOTHER'S OCCUPATION: \_\_\_\_\_

MOTHER'S PLACE OF EMPLOYMENT: \_\_\_\_\_

MOTHER'S ANNUAL SALARY: \$ \_\_\_\_\_ per year

FATHER'S NAME: \_\_\_\_\_

FATHER'S MAILING ADDRESS: \_\_\_\_\_

FATHER'S OCCUPATION: \_\_\_\_\_

FATHER'S PLACE OF EMPLOYMENT: \_\_\_\_\_

FATHER'S ANNUAL SALARY: \$ \_\_\_\_\_ per year

LIST SIBLINGS (brothers/sisters), WITH AGES:

1) \_\_\_\_\_ 2) \_\_\_\_\_  
(sibling name, age) (sibling name, age)

3) \_\_\_\_\_ 4) \_\_\_\_\_  
(sibling name, age) (sibling name, age)

5) \_\_\_\_\_ 6) \_\_\_\_\_  
(sibling name, age) (sibling name, age)

7) \_\_\_\_\_ 8) \_\_\_\_\_  
(sibling name, age) (sibling name, age)

DO YOU RECEIVE SOCIAL SECURITY BENEFITS? \_\_\_\_ NO \_\_\_\_ YES

DO YOU RECEIVE WELFARE BENEFITS? \_\_\_\_ NO \_\_\_\_ YES

ARE THERE ANY UNUSUAL FINANCIAL BURDENS FACED BY YOUR FAMILY? \_\_\_\_ NO \_\_\_\_ YES  
IF YOU ANSWERED YES, PLEASE DESCRIBE:

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WHAT IS YOUR GRADE POINT AVERAGE (GPA): \_\_\_\_\_

WHAT IS YOUR HIGHEST S.A.T. SCORE:

VERBAL \_\_\_\_\_ MATH \_\_\_\_\_ WRITING \_\_\_\_\_

COLLEGE / UNIVERSITY / TRADE SCHOOL OF CHOICE (if known at the time of applying):

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YOUR CAREER CHOICE:

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LIST YOUR HIGH SCHOOL ACTIVITIES:

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LIST YOUR EXTRA-CURRICULAR ACTIVITIES:

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LIST YOUR COMMUNITY / CIVIC ACTIVITIES:

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LIST THE NAME OF YOUR LOCAL NEWSPAPER:

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**ESSAY QUESTION:** (type-written, minimum 400 words, maximum 500 words.)

*“What motivates people, such as yourself, to see a movie in a theatre vs at home?”*

**7 pages total / END OF APPLICATION**

Scholarship Application and all Supporting Paperwork must be postmarked by December 2, 2019. No exceptions.