



ALVIN “BUTCH” AND LORRAINE “MUTZIE” ORTNER CHARITABLE FOUNDATION

Instructions for Scholarship Application

1. The attached application is to be used for the **Alvin “Butch” & Lorraine “Mutzie” Ortner Charitable Scholarship** offered through the Tuscola County Community Foundation. Two (2) scholarships, \$2,000 each, renewable up to 3 years or until attained terminal program degree. **These scholarships are available to a graduating Frankenmuth High School senior with a GPA of 2.0 or better who has demonstrated good character and citizenship during high school career and is pursuing post-secondary education. (i.e., vocational/trade schools, certificate programs, community colleges or 4-year universities) in Agriculture or Agriculture related field of study requiring post-secondary education.**
2. The scholarship award shall be distributed to the post-secondary institute selected by the scholarship recipient.
3. Applications and required attachments must be **postmarked by March 15, 2025, to:**

**Tuscola County Community Foundation
Alvin “Butch” & Mutzie Ortner Charitable Scholarship
P.O. Box 534
Caro, MI 48723**

4. Applications are to be typed or legibly printed in ink and must be signed by the applicant. Applications not signed will not be considered.
5. Submit the **original application and one official high school transcript along with four (4) copies of each (including letter of recommendations and any attachments).** Please have original printed single sided and no staples.
6. Attach to the application **and each of the four (4) copies of the application** a short (200 words or less) essay (double-spaced, 12-point font) on:
 - a. Your reasons for choosing Agriculture Studies
 - b. Your intentions of continuing the development of your skills over the next 5 years



ALVIN "BUTCH" AND MUTZIE ORTNER CHARITABLE FOUNDATION SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Name: Last First Middle

Permanent Address: Street City State Zip

Date of Birth: Email:

Telephone: Grade point average using a 4-pt. scale:

High School: Graduation Date:

FAMILY INFORMATION

Name of parent/guardian: Occupation

Address: Street City State Zip

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Address: Street City State Zip

Post-secondary school you are planning to attend:

Have you been accepted at this school? Yes No

Full-time student? Yes No If no, number of credits:

Major field of study:

Please list scholarships applied for:

Please list scholarships granted and amounts:

SCHOOL & COMMUNITY ACTIVITIES

Using only the space below, list extracurricular, community and religious activities in which you have participated during the past 4 years. **Please list them in order of importance to you.**

Activity	Num. of Years	Leadership Positions, Awards and Recognitions

WORK EXPERIENCE

Using only the space below, please list your paid work experience during the past four years, beginning with your most recent positions.

Employer	Nature of Work	Dates of Employment	Hrs./Week

CERTIFICATION

I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge. I consent to having my name and image likeness included in public/media releases. If under 18, parent/guardian must also sign.

Applicant's Signature	Date
Parent/Guardian Signature (if applicable)	Date