



Educational Grant Form

(New Instructions...Read Carefully)

*****Application Must Be Postmarked No Later Than 07/01/2025*****

NOTE: Awards limited to the first 25 applicants who meet criteria

To Be Eligible:

- Applicant must have maintained minimum 2.0 GPA or "C" average equivalent (Disregard if not currently a student)
- Applicant **must provide proof of GPA when submitting application**
- Applicant must be resident of East St. Louis for at least past 2 years (Time away attending school does not make you ineligible)
- Applicant shall be free of illegal drug use
- Applicant shall not have affiliation in illegal gang-related activities

The Brad Wamser Educational Fund for East St. Louisans & greater St. Louis area was established in October of 1991 to honor the memory of Brad Wamser, who was killed in a car accident at a young age.

The Brad Wamser Educational Grant encourages education by awarding educational financial assistance in the form of a gift to qualified St. Louis citizens of all ages.

This application is for a \$1,000.00 gift, which if awarded will be deposited into the recipient's school account at the school that the recipient will be attending. This gift is SPECIFICALLY FOR THE PURCHASE OF CLASS TEXTBOOKS and school related amenities. Remaining balances, if any, will remain in the student's account and shall be applied toward the following semester. This year there are funds available to award up to 25 educational grant gifts.

INSTRUCTIONS:

This application contains three forms: **"Applicant Form"**, **"Business Office Information Form"** and **"Recommender Form"**(insert).

APPLICANT SHALL:

1. Completely fill out BOTH sides of *Applicant Form* and *Bookstore Information Form*.
2. Take *Recommender Form* to a teacher, counselor, employer or another adult who knows you well. Ask them to fill out the Recommender Form on BOTH SIDES and give it back to you as soon as possible, so that you can mail it with the rest of your application. THIS FORM MUST BE MAILED WITH THE REST OF YOUR APPLICATION. DO NOT MAIL THIS OR ANY PORTION OF THE APPLICATION SEPARATELY, OR YOU WILL BE DISQUALIFIED.
3. Applicant **MUST** mail the **THREE** completed forms **AND TRANSCRIPTS** at the **SAME TIME** or your application will be immediately disqualified.

***INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.** For further instructions, see application.

On behalf of the Brad Wamser Educational Fund for East St. Louisans, best wishes in furthering your education.

IMPORTANT NOTE: IF YOU CHANGE SCHOOLS... IN ORDER FOR YOUR AWARD TO TRANSFER, THIS OFFICE MUST HAVE NOTICE OF THE NEW COLLEGE INFORMATION NO LATER THAN AUGUST 1, 2025. NO TRANSFERS WILL BE ACCEPTED AFTER THAT DATE AND YOUR AWARD WILL BE FORFEITED.

Ok to Duplicate for Additional Blank Copies

**BUSINESS OFFICE
INFORMATION FORM**

IMPORTANT: In order for your application to be considered for an award, you **MUST** provide **ALL** of the following information: *(Please Print)*

Name of school you will attend in the Fall: _____

Business Office Location: Bldg # _____

Business Office Contact: _____
First name Last name

Business Office Phone #: _____
Area code Phone number

REMINDER: Mail the above information along with *Applicant Form, Recommender Form, and School Transcripts* to:

The Brad Wamser Educational Fund for East St. Louisans
c/o Slay Industries
1441 Hampton Ave.
St. Louis, MO 63139

***You must mail ALL completed application forms AT THE SAME TIME or your application will be immediately disqualified.**

Must be postmarked no later than 07/01/2025

Ok to Duplicate for Additional Blank Copies

**Brad Wamser Educational Fund for East St. Louisans
Book Grant Application Form**

**TO BE FILLED OUT ON BOTH SIDES BY APPLICANT AND SIGNED BY
PARENT OR GUARDIAN***

To be Eligible...

- Applicant must have maintained minimum 2.0 GPA or "C" average equivalent (Disregard if not currently a student)
- Applicant **must provide proof of GPA when submitting application** (Disregard if not currently a student)
- Applicant must be resident of East St. Louis for at least past 2 years (Time away attending school does not make you ineligible)
- Applicant shall be free of illegal drug use
- Applicant shall not have affiliation in illegal gang-related activities

1. **Briefly tell the review committee about yourself and your educational and career goals** (Use an additional sheet if necessary)

2. **Why is it important for you to receive this award?** (Use an additional sheet if necessary)

3. **Do you expect to receive financial assistance from other sources (i.e.: PEL, etc.)?** ____ Yes

____ No

If yes, from where? _____

— The **Brad Wamser Educational Fund for East St. Louisans** encourages education by awarding educational financial assistance in the form of a gift to qualified East St. Louis citizens of all ages who need financial assistance to continue their studies. Gifts are awarded without regard to race, religion, gender or sexual orientation and are available for college, junior college, vocational or professional training and graduate work. The gift is part of an educational fund administered by a volunteer advisory board.

IMPORTANT: Complete applications postmarked no later than 07/01/25 will be considered in the order received. Due to the volume of applications, THE AWARDS WILL BE LIMITED TO THE FIRST 25 APPLICANTS WHO MEET ALL THE CRITERIA STATED ON APPLICATION.

Must complete ALL information. Incomplete applications will not be considered.

1. Name _____
Last (Family) First Middle
Sex _____ June Age _____ Date of Birth _____ Social Security # _____
Mo/Day/Year (must include)
Home Phone _____ - _____ Work Phone _____ - _____
Area Number Area Number

2. Home Address _____
Street and Number City State Zip Code
Mailing Address (if different) or P.O. Box # _____

3. Father _____ or Guardian _____
Address _____
Street and Number City State Zip Code
Home Phone _____ - _____ Work Phone _____ - _____
Area Number Area Number
Mother _____ or Guardian _____
Address _____
Street and Number City State Zip Code
Home Phone _____ - _____ Work Phone _____ - _____
Area Number Area Number

4. Present School _____
School Address _____
Street and Number City State Zip Code
School Phone _____ - _____
Area Number
Present Grade Level _____ Present G.P.A. _____
Name of Guidance Counselor _____

5. School Planning to Attend _____
School Phone _____ - _____
Area Number
School Address _____
Street and Number City State Zip Code

6. Field of Study _____
Signature of Parent or Guardian* _____ Date _____
Signature of Applicant _____ Date _____
*Signature of Parent or Guardian required if Applicant is under 18 years of age

Reminder: You must enclose transcripts, Recommender Form, & Business Office Information Form with this application. Mail all together.

To The Recommender:

The space below is provided for your candid comments about the applicant. We rely upon the comments of recommenders in evaluating students' applications for financial assistance awards. We would like to know how you perceive this student's ability to succeed in his/her chosen field and his/her responsibility in fulfilling obligations. From your knowledge of this person, please explain why you feel this person would benefit from this financial award. Please use any specific examples that you believe may help us know the applicant better.

Reminder: Please return this form to the student as soon as possible.

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