

CARROLL COUNTY CHAPTER Maryland Municipal League, Inc.



2025 Scholarship Program

The Carroll County Chapter of the Maryland Municipal League will offer three (3) \$1,000 scholarships to Carroll County High School students who have been accepted into a College or University or Carroll County students currently enrolled in a College or University in a Graduate or Undergraduate program.

The Application is available for download at www.hampsteadmd.gov under News & Announcements. The application is also available at your High School Guidance Office and at your local Town Office.

Student Eligibility

mu	plicant must be a resident of one of the eight (8) <i>incorporated</i> municipalities in Carroll County. These nicipalities are Hampstead, Manchester, Mt. Airy, New Windsor, Sykesville, Taneytown, Union Bridge, d Westminster.	
	plicant must have a good scholastic standing. (Please attach transcript from the High School you are rently attending.)	
Selection Criteria		
De:	monstrated commitment to public service, e.g., past or current involvement with civic organizations.	
\square Ap	plicant's statement of educational objectives and career goals.	
☐ Tw	vo letters of recommendation. One (1) from a Faculty Member	
Completion of the scholarship application.		
Essay (typed) – Topic: Municipal Government In Your Town		
	1. Identify the challenges faced by your Mayor and Council.	

- 2. Select one or more of these challenges and explain how you would address the challenge if **you** were the Mayor or a Council Member.
- 3. Explain how <u>vou</u> would disseminate <u>vour decision</u> to address the challenge(s) to the citizens of your municipality.

The application must be the 2025 Application Form and must be <u>received</u> at the address below by 4:00 p.m. on or before Friday, April 25, 2025.

Please submit completed application to:

Council Member Dave Unglesbee MML Scholarship Chairperson Hampstead Town Office 1034 South Carroll Street Hampstead, Maryland 21074

Questions should be directed to Council Member Dave Unglesbee, 443-289-6009 or askdayeu@aol.com.



CARROLL COUNTY CHAPTER

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2025 Scholarship Program - Student Scholarship Application

1.	Name in Fun.
2.	Present Address:
	Telephone Number:
3.	E-mail:
4.	Name of Municipality you reside within:
5.	Name of the educational institution at which you wish to pursue your studies:
6.	List proposed field or specialization of study, toward what degree will you be working, and when do you anticipate graduating?
7.	List High School attended. (Submit official transcript for current educational institution.)
	High School and State Expected Date of Graduation
8.	Have you ever received academic honors or awards for scholastic achievement? (Include high school, undergraduate and graduate studies)
	No Yes
	If yes, list:
9.	Please list your involvement with civic, volunteer and/or charity organizations, number of service hours. Attach separate sheets if necessary.
_	Jomes and Title of view Feaulty Advisor
	Name and Title of your Faculty Adviser:
	stitution: Email
I ce	tify that the information given in this application is true and accurate.
Sig	ature of ApplicantDate