



*Tennessee Funeral Directors Association
Memorial Scholarship Program*

The Board of Directors of the Tennessee Funeral Directors Association at its regular Board Meeting, January 15, 1997, established the TFDA Memorial Scholarship. Mr. Herbert W. Mayes was a longtime funeral director/embalmer and the owner of Mayes Mortuary in Morristown, TN. At his death, memorial contributions, at the request of his family, were given in his memory to establish a scholarship fund. The TFDA, with permission of the Mayes family, used those funds to begin the TFDA Memorial Scholarship Program.

The Scholarship was established to provide financial awards to students enrolled as full-time students in a funeral service or mortuary science program to assist them in obtaining their professional education.

Selection of the scholarship recipients is competitive. The selection is made by a Scholarship Committee of the TFDA.

ELIGIBILITY: To be considered for an award, a student must:

1. Have completed one (1) semester of his/her course of study at a college accredited by the American Board of Funeral Service Education, and have expressed the intent to enter funeral service upon graduation.
2. Have at least one semester, or term, remaining in his/her funeral service program in order to be considered;
3. Complete all forms required by the Tennessee Funeral Directors Association and submit them prior to the deadline date. Late or incomplete applications will not be considered.
4. Be a citizen of the U.S., a legal resident of the State of Tennessee and intend to practice in Tennessee upon graduation.



PROCEDURES AND REQUIREMENTS:

I PERSONAL INFORMATION

Name: _____ Phone: _____

Permanent Address: _____

Current Address: (if different) _____

Date of Birth: _____ Place of Birth: _____

Marital Status: ___ Never Married, ___ Widowed, ___ Divorced, ___ Separated

Dependents: (Names & Ages): _____

II PARENT'S INFORMATION

(Complete only if you are declared a dependent on your parent's Federal Income Tax Form that you are enclosing)

Father's Name: _____ Deceased? _____

Address: _____

City: _____ State: _____ Zip: _____

Father's Occupation & Place of Employment: _____

Mother's Name: _____ Deceased? _____

Address: _____

City: _____ State: _____ Zip: _____

Mother's Occupation and Place Employment: _____

Other Dependents in Your Family: _____

Name: _____ Age: _____ College last Year? _____ Fees paid by Parents _____



Only those students who have completed one (1) semester of his/her course of study at a college accredited by the American Board of Funeral Service Education, and who have expressed the intent to enter funeral service upon graduation.

1. Complete and return the scholarship application form of the TFDA including the required essays to the address below. The application form may be obtained from the financial aid officer at the accredited college or by writing TFDA at:

**Tennessee Funeral Directors Association
Scholarship Committee
1616 Church Street, Suite A
Nashville, TN 37203**

NOTE: Applications must be received by U.S. Mail, Federal Express or in person. We will not accept any applications that are FAXED;

2. Federal Income Tax Return:
 - a. Your latest IRS Form 1040; or
 - b. Your parents' or legal guardian's IRS Form 1040 (If you are claimed as a dependent on their return);
3. College Transcripts: From each and every college that you have attended (including funeral service colleges);
4. Letter of recommendation: From two people other than a faculty member or anyone connect with the mortuary college at which are (were) enrolled;
5. Essay #1: Write a two page essay (HAND WRITTEN – NOT TYPED) about yourself (enough that we will be able to know something about you); include why you decided to enter funeral service and what the word “service” means to you;

The TFDA Scholarship Committee will take into consideration financial need, G.P.A, attendance record, recommendations, extracurricular/Community service and the required essay.



III PERSONAL FINANCIAL STATEMENT:

Briefly explain your financial need including how you are paying your tuition and expenses; your support (and grants, scholarships VA payments, parental support, personal savings, income from work, etc.)

IV SPOUSE'S INFORMATION (If Applicable)

Name: _____

Address if different than yours: _____

Occupation and place of employment: _____

If your spouse files a separate tax return, you must provide a photocopy of his/her last year's IRS Form 1040.

V EDUCATION/MILITARY BACKGROUND:

High School	Years Attended	Year Graduated
_____	_____	_____

Colleges	Years Attended Major	Year Graduated
_____	_____	_____

Military Background (if any)

VI COMMUNITY SERVICE: Church activities, Awards and Honors received:

VII WORK EXPERIENCE: (Include part-time and summer employment)

Employer	Dates	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you had any funeral service related jobs? _____, Apprenticeship served? Yes No

If yes, Where and when? _____

I understand that the information submitted within this application is being used in consideration for a scholarship. I hereby certify that all the information is true and factual and can be verified by proper documentation, if required. I also certify that I completed the application on my own.

Your signature: _____ Date: _____