

## BIG D DETACHMENT – MARINE CORPS LEAGUE DALLAS, TEXAS



SPONSOR Information To be completed by the MCL Sponsor

Name:	
Address:	
City, State, Zip:	
Phone:	
Email:	

RELATIONSHIP TO APPLICANT:

For Big D Internal use only			
Member #: Life member #:			
Sr. Vice Commandant Approval: Yes No If no, Why not?			
Signature			
Paymaster verification of good standing:  Yes  No			
Signature			
Commandant: Signature			
(If Commandant is sponsor, Sr. Vice Commandant to verify & sign)			



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## DAN THOMAS SCHOLARSHIP Renewal APPICATION

APPLICANT			
Name: Please Print			
Address:			
City:	State:	Zip:	
Phone Number:	-		
Email:			
If you are selected to receive a scholarship, where would you like the check mailed:			
Address:			
Applicant signature	Date si	gned	
Name of School you are attending:			
Big D Sponsor Information: (Sponsor must be a member of the Big D Detachment)			
Sponsor Name: Please Print I hereby certify that the scholarship applicant is a son, daughter, grandson, or granddaughter of mine:			

Sponsor Signature: \_\_\_\_\_

Date signed: \_\_\_\_\_