



## 2026 Norm Manly Maritime Education Scholarship Application

Applicant's Name: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: WA Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_

If affiliated with a YMTA educational maritime program or a Sea Scout Ship (informational only),

Name of the program or ship: \_\_\_\_\_

Name of teacher or skipper: \_\_\_\_\_

Are you a relative of a member of the PSM Board of Governors, PSM's YMTA Committee or executive management team, or owner of businesses/organizations sponsoring a YMTA scholarship?

☐ Yes ☐ No

### EDUCATION

High School or GED Program: \_\_\_\_\_ GPA: \_\_\_\_\_

Supporting Teacher's Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Teacher's Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Teacher's email: \_\_\_\_\_

Academic Honors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Institutes, Colleges or Universities Applied to: \_\_\_\_\_

\_\_\_\_\_

Institutes, Colleges or Universities Accepted by: \_\_\_\_\_

\_\_\_\_\_

## **ATTACHMENTS**

**HIGH SCHOOL TRANSCRIPT:** Obtain a copy of your current unofficial high school transcript that includes list of course and grades from your high school office and attach the transcript to your application.

**ESSAY: (500 words minimum):** Write and submit an essay that describes the course of study you plan to pursue and how this scholarship will assist you to secure a marine-related career. In addition, the essay should address personal and career goals, career path plans, marine interest and experiences, relevant academic and work experiences (including community service). Essays will be judged for content, organization, grammar, spelling and neatness.

**LETTERS OF SUPPORT:** Applicants must submit: (A) one letter of support from a teacher (an additional letter from a second teacher is required if GPA is less than 2.5), and may submit (B) an optional letter of support from a member of the maritime community is encouraged. Letters will be reviewed to assess the applicant's character, initiative, leadership abilities, and commitment to a marine career.

**CHECK LIST:** Please complete the following check list to ensure your application is complete. Applicants are encouraged to have a parent or teacher review their application package prior to being submitted to the YMTA Committee. Your application must be complete before it will be accepted.

- 1 - [    ] Verify: You are a resident of Washington State; only Washington state residents are eligible to apply.
- 2 - [    ] Fully completed Scholarship Application (these pages)
- 3 - [    ] Current unofficial transcript
- 4 - [    ] 500 word (minimum) essay
- 5 - [    ] Letters of support from a teacher (if GPA is less than 2.5, a second letter from a teacher is required), and from a member of the maritime community (optional)
- 6 - [    ] Signature and date on this application

**APPLICATION DEADLINE:** PSM's YMTA Committee must receive your application by no later than **5:00 PM on Monday, March 30<sup>th</sup> 2025.**

**ALL OF THE ABOVE TO BE SUBMITTED DIRECTLY TO THE YMTA COMMITTEE POINT-OF-CONTACT AND RECEIVED BY MAIL OR ELECTRONIC SUBMISSION BY THE DEADLINE:**

Puget Sound Maritime  
Attn: YMTA Committee  
PO Box 81142  
Seattle, WA 98108

or      Roger Ottenbach  
ymta@pugetmaritime.org

If you have questions, contact Roger Ottenbach by email - ymta@pugetmaritime.org or phone - (206)812-5464.

PSM shall have no obligation to retain or return any application materials. You agree that PSM/YMTA shall have the right – but not the obligation – to use your scholarship essay in whole or in part, as well as your name, photograph and biographical facts on their websites, marketing materials, and in connection with publicity for PSM and its programs. You warrant to PSM that your essay is your original work and does not infringe copyright or any other right of any person or entity and that all materials and information you provide in connection with your application are complete and accurate. Subject to third party confidentiality rights, you authorize PSM to disclose the materials and information you provide to contact other persons as PSM deems necessary in connection with consideration of your application for a scholarship, as necessary for PSM's operation or business purposes and/or as required by law.

PSM/YMTA scholarships shall be available to individuals without regard to race, age, religion, color, creed, sex, sexual orientation, national origin, physical, sensory or mental disability, marital, ancestry, genetic information, political ideology, or status in any other legally protected group.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_