

# NCNGA Educational Foundation

## SCHOLARSHIP APPLICATION

FOR OFFICE USE ONLY
GPA
INCOME
GUARD
FIELD



Applicant Name \_\_\_\_\_

Current Status of Enrollment:  
High School \_\_\_\_\_ College \_\_\_\_\_  
Community/Technical College \_\_\_\_\_  
Graduate School \_\_\_\_\_

7410 Chapel Hill Road  
Raleigh, NC 27607-5047

### Required Association Member Information

- Name of service member applicant is related to:  
\_\_\_\_\_
- Service Member's relationship to applicant:  
\_\_\_\_\_
- Is the service member an active or associate member of the NC National Guard Association?  
YES  NO
- Give rank, unit & Military Occupational Specialty (MOS) of service member if active:  
\_\_\_\_\_
- Give rank, unit, MOS and dates of service if associate:  
\_\_\_\_\_
- If Association member is retired or deceased, please provide current and/or past unit of service & MOS:  
\_\_\_\_\_
- If deceased, please provide date of death and membership number. Proof of membership required upon request.  
\_\_\_\_\_

### SCHOLARSHIP INFORMATION

One-year scholarships are awarded to qualified applicants who are active or associate members of the North Carolina National Guard Association; spouses; children; grandchildren or legal dependents of active, associate or deceased life members. Scholarship recipients must attend a regionally accredited institution of education and may re-apply yearly by completing a current application and competing on the same basis as other applicants. ***College students with only one semester remaining prior to graduation are ineligible to receive an award.***

## **REQUIRED INFORMATION**

All information is confidential, and tax information will be destroyed after selection process is complete. All applications received will become property of the Educational Foundation. *This application must be accompanied by the following required attachments, or it will be considered incomplete:*

### **1. TRANSCRIPTS**

High School Seniors - **official, sealed** high school transcript including first semester of grade twelve

High School Graduates - **official, sealed** high school transcript

College Freshmen - **official, sealed** high school and college transcripts.

All other applicants - **official, sealed** transcripts for all formal education completed after high school

**NOTE: ALL TRANSCRIPTS MUST BE IN A SEALED ENVELOPE FROM SCHOOL**

### **2. INCOME VERIFICATION**

Single Applicant - a **signed copy** of page one, **front and back** of **last filed FEDERAL** tax return for **applicant and whoever claimed applicant** as a dependent and the page showing **“taxable income”** on their tax return. Transcripts from IRS will **NOT** be accepted.

Married Applicant - a **signed copy** of page one, **front and back** of **last filed FEDERAL** tax return for **applicant and spouse** and the page showing **“taxable income”** on their tax return. Transcripts from IRS will **NOT** be accepted.

College applicants that worked, but were also claimed on their parents taxes, will need to submit a **signed copy** of page one, **front and back** of **last filed FEDERAL** tax return for **applicant and whoever claimed applicant** as a dependent and the page showing **“taxable income”** on their tax return. Transcripts from IRS will **NOT** be accepted.

### **3. PERSONAL LETTER**

Stating specific educational goals and anticipated occupation or profession in 200 words or less.

**Dates for submitting applications are as follows:**

College Student and High School Graduates:

**January 1 thru February 1**

High School Seniors:

**February 1 thru March 1**

**IMPORTANT:** If a transcript is being sent by the school at the applicant’s request, it is the applicant’s responsibility to follow up and be sure that it is received by the Educational Foundation’s office before the deadline for the submission of that application. If not received by the deadline, application will be considered incomplete. *Applications that are incomplete or postmarked after application due date shown above will not be considered for a scholarship.* See back of application for further information.

**Application must be complete, using “not applicable” (N/A) where necessary)**

1. \_\_\_\_\_  
Last Name                      First Name                      Middle Initial                      Social Security Number (last 4)

\_\_\_\_\_  
Applicant’s Home Address                      City                      State                      Zip Code                      Telephone Number

\_\_\_\_\_  
Local/Campus Address of Applicant                      City                      State                      Zip Code                      Telephone Number

2. \_\_\_\_\_  
Name of Parent(s) or Guardian(s)

\_\_\_\_\_  
Address                      City                      State                      Zip Code                      Telephone Number

3. School/college currently attending: \_\_\_\_\_

Address and Telephone: \_\_\_\_\_

Circle Current Class:      Freshman                      Sophomore                      Junior                      Senior                      Post Grad

4. Name of College you plan to attend this fall: \_\_\_\_\_

Address and Telephone: \_\_\_\_\_

Have you been formally accepted: Yes \_\_\_\_\_ No \_\_\_\_\_

Indicate major/area of study: \_\_\_\_\_

*(If teaching list grade and subject; if medical list specific field)*

Anticipate date of graduation: \_\_\_\_\_

5. Leader/Citizenship:

\*List civic/community activities in which you have participated within the past two (2) years:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*List school and academic activities in which you have participated within the past two (2) years:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\* If needed, use back of application for additional information or attach a separate page.*

\* List offices to which you have been elected and honors, awards, and special recognitions, which you have received within the past two (2) years:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\* If needed, use back of application for additional information or attach a separate page.*

6. List all monetary educational assistance you anticipate during the next school year (if not listed on the application addendum):

**Source**

**Amount**

\_\_\_\_\_  
\_\_\_\_\_

7. Name and address of local newspaper(s):

\_\_\_\_\_  
\_\_\_\_\_

If I am an award recipient, you have my permission to release award information for publication. If applicant is under eighteen years of age, parent or guardian please sign.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant or Parent/Guardian

**TO BE COMPLETED BY PARENT OR GUARDIAN**

*(If applicant is claimed as dependent on tax return)*

1. Occupation of Father: \_\_\_\_\_

Mother: \_\_\_\_\_

2. Ages of other dependent children/family members: \_\_\_\_\_

3. Number of other children attending college/vocational school and name of school(s): \_\_\_\_\_  
\_\_\_\_\_

4. Comments (i.e., unusual expenses for family members) \_\_\_\_\_  
\_\_\_\_\_

I hereby declare that to the best of my knowledge and belief the foregoing statements are complete and correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

**TO BE COMPLETED BY APPLICANT**

1. Applicant's occupation: \_\_\_\_\_

If married, spouse's occupation: \_\_\_\_\_

2. If student, list any part-time employment-giving name of business and income received. \_\_\_\_\_

\_\_\_\_\_

3. Ages of dependent children: \_\_\_\_\_

4. Are you, the applicant, a member of the North Carolina National Guard? Yes \_\_\_\_ No \_\_\_\_

If yes, complete the attached application addendum.

5. Are you, the applicant, an active or associate member of the NC National Guard Association? Yes \_\_\_\_ No \_\_\_\_

6. Comments (i.e., unusual expenses for family members): \_\_\_\_\_

\_\_\_\_\_

I hereby declare that to the best of my knowledge and belief the foregoing statements are complete and correct.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant

**ADDITIONAL INFORMATION**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SCHOLARSHIP INFORMATION

One-year scholarships are awarded to qualified applicants who are active or associate members of the North Carolina National Guard Association; spouses; children; grandchildren or legal dependents of active, associate or deceased life members. Scholarship recipients must attend a regionally accredited institution of education and may re-apply yearly by completing a current application and competing on the same basis as other applicants. ***College students with only one semester remaining prior to graduation are ineligible to receive an award.***

**Applications are individually and equitably evaluated on the basis of:**

**1. Academic Achievement:**

Applicant's grade point average on current official transcript. ***(GPA must be 2.0 or higher, and applicant must be enrolled for a minimum of six (6) credit hours per semester).***

**2. Need:**

Applicant's need for financial assistance in order to continue education.

**3. Leadership/Citizenship:**

Applicant's involvement and leadership in school, civic and/or community activities.

**4. Additional Information:**

Applicant's personal letter, unusual and/or specific circumstances, academic workload, quality of completed application package and other pertinent information.

**The following Special Scholarships are also available:**

- ***Special Population Scholarship:***

Individuals who are learning disabled and/or physically disabled/handicapped may apply.

Please call 919-851-3390 ext. 5 for further information and the appropriate application addendum.

- ***Academic Excellence/Leadership Award:***

- \* Applicants must show excellence in academics and leadership

- \* Applicants must meet all required criteria with the exception of need

- \* A 3.5 or higher GPA is required

- \* Must be an undergraduate student at a 4 year college or university

- \* Income verification is **NOT** required when competing for this scholarship

- \* Applicant must write **"Academic Excellence/Leadership Award Only"** at the top of the first page of the application

- \* Applicant **must submit a separate application**, including income verification if they wish to compete for other scholarships.

Please call 919-851-3390 ext. 5 if further information is needed.

Send completed application and required information to:

North Carolina National Guard Association Educational Foundation, Inc.

7410 Chapel Hill Road

Raleigh, NC 27607-5047

**North Carolina National Guard Association**

**Educational Foundation, Inc.**

**7410 Chapel Hill Road**

Raleigh, NC 27607-5047

919-851-3390 ext. 5

**SCHOLARSHIP APPLICATION ADDENDUM**

This addendum must be completed and returned with the completed application if applicant is a member of the North Carolina National Guard, ROTC, or any other military reserve component. The information is needed to determine eligibility for specific Educational Foundation scholarships.

1. Date of original NCNG enlistment: \_\_\_\_\_  
Date of current expiration of term of service (ETS): \_\_\_\_\_  
Date of NCNG commission: \_\_\_\_\_

2. Are you presently attending or a graduate of the North Carolina Military Academy Officers Candidate School?  
Yes \_\_\_\_ No \_\_\_\_

3. Are you a member of the North Carolina National Guard Association?  
Yes \_\_\_\_ No \_\_\_\_

4. Please list income you expect to receive during the next twelve months from the following educational assistance programs:

- a) GI Bill \$ \_\_\_\_\_  
b) ROTC \$ \_\_\_\_\_  
c) NCNG Tuition Assistance Program (TAP) \$ \_\_\_\_\_  
d) Army Continuing Education System (ACES) \$ \_\_\_\_\_  
e) Other programs (name and Amount)  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Rank

\_\_\_\_\_  
Unit

**North Carolina National Guard Association  
Educational Foundation**

**SCHOLARSHIP APPLICATIONS**

**IMPORTANT**

Applications that are incomplete or postmarked after applicable due date shown below ***WILL NOT*** be considered for a scholarship.

**DUE DATE:**

College students and High School graduates: **January 1 through February 1**

High School Seniors: **February 1 through March 1**

Check off the following **REQUIRED ATTACHMENTS** indicating they are enclosed or being forwarded by the school, and **RETURN** this sheet with your application.

Transcripts (***must be in sealed envelope from school***): Enclosed \_\_\_\_\_ School forwarding \_\_\_\_\_

Income Verification: Enclosed \_\_\_\_\_

Personal Letter (200 words or less): Enclosed \_\_\_\_\_

Name & Telephone Number: \_\_\_\_\_

Applicant and/or parent e-mail Address: \_\_\_\_\_