



North Carolina National Guard Association
 Educational Foundation, Inc.
 7410 Chapel Hill Road
 Raleigh, NC 27607-5047

Name _____

Current Status of Enrollment:
 High School () College ()
 Community / Technical College ()
 Graduate School ()

FOR OFFICE USE ONLY
GPA
INCOME
GUARD
FIELD

SCHOLARSHIP APPLICATION

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** high school transcript including first semester of grade twelve.

High School Graduates - **official** high school transcript.

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

All other applicants - **official** transcripts for all formal education completed after high 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 on their tax return.

Married Applicant - a **signed copy** of page one, **front and back** of last filed **FEDERAL** tax return for **applicant and spouse**.

3. PERSONAL LETTER

Stating specific educational goals and anticipated occupation or profession.

Dates for submitting applications are as follows:

College Student and High School Graduates:
 High School Seniors:

January 1 thru February 1
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

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/school and academic activities in which you have participated within the past two 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 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. Are you an active or associate member of the NC National Guard Association? Yes () No ()
(a) Give rank and unit if active: _____
(b) Give rank, unit and dates of service if associate: _____
5. 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 a member of the North Carolina National Guard? Yes () No ()
If yes, complete the attached application addendum.
5. Are you an active or associate member of the NC National Guard Association? Yes () No ()
6. Give name, relationship, rank and unit of parent/guardian, spouse or grandparent who is an active, associate or deceased life member of the NC National Guard Association, if not listed above. If deceased, please provide date of death or membership number. (Proof of membership required upon request).

7. 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 reapply 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 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 1-800-821-6159 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 1-800-821-6159 or 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**

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: Enclosed () School forwarding ()

Income Verification: Enclosed ()

Personal Letter: Enclosed ()

Name & Telephone Number: _____

E-mail Address: _____