

NATIONAL SCHOLARSHIP INFORMATION

ENLISTED ASSOCIATION OF THE NATIONAL GUARD OF THE UNITED STATES AUXILIARY

APPLICATION FOR SCHOLARSHIP

Name: _____
Last First Middle

Home Address:

_____ Street City State Zip Code

Telephone Birth Date Social Security Number

Male _____ Female _____ Single _____ Married _____

Name, Rank, Address, Phone and Unit of Parent, Step parent, Grandparent, Step grandparent, Spouse or Sponsor who is a National Guard Member: _____

_____ Expiration Date of Enlistment _____

Current Status of Applicant (check one):

High School _____ College _____ Business/Trade _____ Working _____

If in school or college, fill in the following information:

Name and Address of School or College and Grade or Term _____

Number of brothers, sisters and their ages (if living at home): _____

Fill in the following information if applicable: _____

Spouse's Occupation _____

Your Occupation: _____

Number of Children and their ages (if living at home): _____

List name and address of College, University, Trade or Business School that you plan to attend: _____

List activities to which you have participated (school, church, community):

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List offices to which you have been elected in any organization:

List honors (school, athletic, citizenship, etc.) which you have been awarded:

What career are you planning to pursue and why? _____

While attending college, will you work part-time _____ or during the summer _____

Persons eligible to apply are: EANGUS Auxiliary members, their spouse, unmarried children/step children, grandchildren/step grandchildren, up to age 26, of annual and life EANGUS Auxiliary members.

State Enlisted Association Auxiliary
and EANGUS Auxiliary Member:

Relationship to you Father
/Step Father, Mother/Step
Mother, Grandparent/Step
Grandparent, Spouse or Self:

I have answered the above questions to the best of my knowledge and belief:

SIGNATURE OF APPLICANT: _____ DATE: _____

SIGNATURE OF PARENT/STEP PARENT/GRANDPARENT/STEP GRANDPARENT OR
SPOUSE: _____

If granted a scholarship and I fail to complete the school for reasons other than sickness or physical injury, I agree to return any scholarship money I received to the Enlisted Association of the National Guard of the United States Auxiliary.

SIGNATURE OF APPLICANT: _____

All applications must be accompanied by:

1. An official transcript of high school credits and/or college credits for applicants already enrolled in institutions of higher learning.
2. **Signed** letter from applicant with specific goals to continue his/her education and why financial aid is required, not less than three hundred fifty (350) words and not to exceed five hundred (500) words.
3. Three **signed** Letters of Recommendation verifying the application and giving personal traits. These may be from high school principal, counselor, dean, professor, minister, employer, etc.
4. A Letter of Recommendation and transmittal from State Auxiliary President, Scholarship Chairperson or Designee.
5. YOU MAY USE SEPARATE SHEETS IF ADDITIONAL SPACE IS NEEDED.

(Deadline postmark date for submission to the National Scholarship Chairperson is 30 June.)

Revised 08/2013

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ENLISTED ASSOCIATION OF THE NATIONAL GUARD THE UNITED STATES AUXILIARY

October 31, 2013

State Auxiliary Presidents, Scholarship Chairperson,
National Officers and Directors

Reference: Scholarship Rules

The Scholarship Committee of EANGUS Auxiliary is accepting applications for the school year 2014-2015. If funds are available, one scholarship in the amount of \$1250.00 will be awarded to the number one ranked applicant and three scholarships in the amount of \$1,000.00 each will be awarded, one being the scholarship donated by USAA.

1. Please read materials carefully before giving any applications to candidates. Be prepared to give assistance if needed. No previous recipients are allowed to apply again.
2. In order for each application to be considered, it **MUST** contain the following documentation – **NO EXCEPTIONS**.
 - a. Official High School/College Transcripts.
 - b. Three **signed** Letters of Recommendation
 - c. **Signed** letter from Applicant containing future goals and need for assistance. The letter must not be less than three hundred fifty (350) words and not to exceed five hundred (500) words.
 - d. A Letter of Recommendation and Transmittal from the State Auxiliary President, Scholarship Chairperson or Designee.
3. EANGUS Auxiliary sponsor must have dues paid to National Auxiliary no later than December 31, 2013.
4. For applicants to be eligible, sponsor's State Auxiliary must make a donation to the EANGUS Auxiliary Scholarship Fund for the current and prior year. (Suggested donation is \$2.00 per member annually payable by December 31.)

It will be the responsibility of each State to make the information available to their membership. You may copy the application, however, **DO NOT** reduce it. Each State is to designate a Scholarship Chairperson and the applications returned to that person by a specific date. The application should then be reviewed to ensure all requirements have been met. Any incorrect applications received by the National Committee will be considered ineligible.

Each scholarship application to be considered by the National Committee must be mailed to Marie Brabham, 3329 Aspen Forest Drive, Middleburg, Florida 32068-4253. If there are any questions, I can be reached at (904) 291-6778. Packets must be postmarked no later than June 30, 2014 in order to be considered.

Marie Brabham
H. Marie Brabham
Auxiliary National Scholarship Chairperson