

**VETERANS AND MILITARY COALITION OF THE OZARKS  
2017 SCHOLARSHIP APPLICATION**

Enclosure 2, Page 1 of 4

1. Full name: \_\_\_\_\_

2. Permanent Home Address:

Street \_\_\_\_\_

Apartment number \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

3. Home Telephone number: \_\_\_\_\_

4. Work Telephone number: \_\_\_\_\_

5. Cell telephone number: \_\_\_\_\_

6. Email address: \_\_\_\_\_

7. Social Security Number: \_\_\_\_\_

8. Citizenship status: \_\_\_\_\_

9. Circle the appropriate qualification basis:

Veteran

Spouse of Veteran

Dependent of Veteran

Active (Active Duty, National Guard or Reserve) - Component \_\_\_\_\_

Spouse of active service member

Dependent of active Service Member

Junior Division ROTC - School: \_\_\_\_\_

Senior Division ROTC – School: \_\_\_\_\_

**2017 SCHOLARSHIP APPLICATION**

Enclosure 2, Page 2 of 4

10. Are you a surviving family member of a US military service member or veteran? \_\_\_\_\_

If yes, what is the family service member's name? \_\_\_\_\_

Your relationship to the service member? \_\_\_\_\_

11. What service did you or your family member serve with? \_\_\_\_\_

Dates of service: \_\_\_\_\_

12. Are you or a family member registered as a member of any veteran service organization?

(i.e. American Legion, Veterans of Foreign Wars, etc) \_\_\_\_\_

\_\_\_\_\_

13. a. Name of school currently attending: \_\_\_\_\_

b. Address of school currently attending: \_\_\_\_\_

14. Name and city of school you plan to attend or have applied to (may be more than one):

**2017 SCHOLARSHIP APPLICATION**

Enclosure 2, Page 3 of 4

15. Are you a full time student? \_\_\_\_\_ Part time? \_\_\_\_\_

16. College major/career choice:

17. Honors and awards (state the year and nature of honor or award):

A. School related:

---

---

---

B. Other (civic/community):

---

---

18. Leadership position and offices held (organization, position, and year):

A. School related:

---

---

---

B. Other (civic/community):

---

19. Extracurricular activities and work experience: (volunteer work, jobs, self-development activities, school activities etc.

---

---

---

## 2017 SCHOLARSHIP APPLICATION

Enclosure 2, Page 4 of 4

20. Complete this item (item #20) only if a high school senior:

a. Rank in graduating class (if known): \_\_\_\_\_ out of \_\_\_\_\_

b. Current grade point average: \_\_\_\_\_ out of possible \_\_\_\_\_

21. Essay requirement: Submit a short essay (on separate sheet of paper) on the subject:

"Why should the Veterans and Military Coalition of the Ozarks award me a scholarship?"

22. Authentication: to the best of my knowledge, the information on this Scholarship

Application is accurate and correct. I understand that any and all of the information is subject to verification by the Veterans and Military Coalition of the Ozarks. I further understand that the decision of the Veterans and Military Coalition of the Ozarks regarding this application and award of scholarships are final and not subject to appeal. I also understand that I will not qualify if I subsequently accept a military academy (any Service) appointment or a fully paid four-year scholarship.

Applicant's signature: \_\_\_\_\_

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

Don't forget to ensure that this application form, two letters of recommendation and transcripts are mailed by 15 February 2016.