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| **Arkansas National Guard Foundation**  **Survivor Scholarship Program**  **Application for Scholarship, Academic Year 2022/2023**  **P.O. Box 663 North Little Rock, AR 72115**  **Eligibility:** The ANGF Survivor’s Educational Assistance is intended for the primary next of kin, including parents, surviving spouses, (so long as they remain unmarried until the age 55), and children up to age 23 of armed services members who lose their lives during the term of their enlistment regardless of military branch, duty status, or manner of death. Siblings of fallen service members are only eligible for financial support if there was a loco parent’s relationship.  **DEADLINE** for submission of applications is ***August 15, 2022.*** If mailed, applications should be addressed to the *ANGF Scholarship Program*, P.O. Box 663, North Little Rock, AR 72115, postmarked no later than August 15, 2022. Envelopes should be marked on the outside with *“Survivor Scholarship Application”. Electronic submissions must be completed through the online portal on the website. NO SUBMISSIONS ACCEPTED VIA EMAIL. www.angf.us/scholarships*  **Application**: *(Space is provided at the last page of this application for additional information for all the below categories):*  Part I: Applicant Information Part II: Deceased Service Member Information Part III: Financial Information Part IV: Awards and Recognition Part V: Community Service Part VI: Extracurricular Activities Part VII: Work Experience Part VIII: Academic Information Part IX: Goals and Career Objectives | | | | | | | | | | | | | | | | |
| **PART I - APPLICANT INFORMATION** | | | | | | | | | | | | | | | | |
| 1. Applicant name and address: | | | | | | | | | | | | | | | | |
|  | |  | | |  |  | | | |  | | | |  |  | |
| Last First MI | | | | | | | | Street | | | | City | | State | | Zip |
| 2. Home Phone #/Work Phone # | | | 3. E-mail address: | | | | | | | | 4. Age: | | 5. Marital status: | | | |
|  | | |  | | | | | | | |  | |  | | | |
| 6. Check correct academic level:  High school student expecting to attend college full-time/part-time in the fall semester.  Currently enrolled in undergraduate college and expecting to continue full or part-time in the fall semester.  Currently enrolled in Junior College/Vocational/Technical School and expecting to continue full or part-time in the fall semester. | | | | | | | | | | | | | | | | |
| **PART II – Deceased Service Member** | | | | | | | | | | | | | | | | |
| 1. Deceased Service Member Name, | | | | | | | | | | | | | | | | |
|  | |  | | |  |  | | | |  | | | |  |  | |
| Last First MI | | | | | | | |  | | | |  | |  | |  |
| 2. Relationship to applicant: |  | | | 3. Rank or last rank held | | | | |  | 4. Branch: Army  Navy  Air Force  Marine  Coast Guard | | | | | | |
| 5. Duty Status at Death: Active Duty  Traditional Guard/Reserve  Active Guard and Reserve (AGR) | | | | | | | | | | | | | | | | |
| **PART III - FINANCIAL INFORMATION (Applicant)** | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| 1. Occupation: | | | | | | | | | | | | | | | | |
| 2. Expected income in 2022: Over $45K Under $45K Under 10K | | | | | | |  | | | 3. Number of dependent children: | | | |  | | |
| 4. Estimated amount of tuition, room and board, and other fees: | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Certification: I certify that all information on this application is true and correct to the best of my knowledge. | | | | | | |
|  | | | | | | |
| Applicant’s Signature and Date Parent/Guardian Signature and Date (if applicable) | | | | | | |
| **PART IV - AWARDS AND RECOGNITION** | | | | | | |
| **List all awards/recognition received in high school, college, or community:** | | | | | | |
| **NAME OF AWARD** | **ORGANIZATION PRESENTING** | | | | **TYPE** | **NO. YEARS** |
|  |  | | | |  |  |
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| **PART V - COMMUNITY SERVICE** | | | | | | |
| **List all community service performed while in high school and college:** | | | | | | |
| **ORGANIZATION** | **ACTIVITY PERFORMED** | | | | | **NO. HOURS** |
|  |  | | | | |  |
|  |  | | | | |  |
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| **PART VI - EXTRACURRICULAR ACTIVITIES** | | | | | | |
| **List all extracurricular activities in which participated while in high school and college:** | | | | | | |
| **ORGANIZATION** | **OFFICE HELD** | **TYPE ACTIVITY** | | | | **NO. YEARS** |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
| **PART VII - WORK EXPERIENCE** | | | | | | |
| **List all jobs held over the past 10 years (start from most recent):** | | | | | | |
| Name and Address of Company: | | Dates Worked | | Reason for Leaving: | | |
|  | | From: |  |  | | |
| To: |  |
| Name and Address of Company: | | Dates Worked | | Reason for Leaving: | | |
|  | | From: |  |  | | |
| To: |  |
| Name and Address of Company: | | Dates Worked | | Reason for Leaving: | | |
|  | | From: |  |  | | |
| To: |  |

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| **PART VIII - ACADEMIC INFORMATION** | | | | | | | | | | | | | | | | | | | | |
| 1. Name and address of high school graduated: | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | |  | | | | | | | |  | | |  | |
| Name | | | Address | | | | | City | | | | | State | | | | | | Zip | |
| 1a. Years attended From:      To: | | | | 1b. Graduation Date: Date: | | | | |  | | | | | 1c. GPA: | | | | | |  |
| 2. Name and address of college(s) attended: | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | |  | | | | | | | |  | | |  | |
| Name | | | Address | | | | | City | | | | | State | | | | | | Zip | |
| 2a. Years attended From:      To: | | | | 2b. Graduation Date: Date: | | | | | |  | | | | 2c. GPA: | | |  | | | |
| 3. Name and address of college(s) attended: | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | |  | | | | | | | |  | | |  | |
| Name | | | Address | | | | | City | | | | | State | | | | | | Zip | |
| 3a. Years attended From:      To: | | | | 3b. Graduation Date: | | | | | |  | | | | 3c. GPA: | | |  | | | |
| 4. Name and address of colleges to which applied: | | | | | | | | | | | | | | | | | | Accepted? | | |
|  | |  | | |  | | | | | | |  | | |  | | |  | | |
| Name Address | | | | | | | City | | | | | State | | Zip | | | |
| 5. Name and address of colleges to which applied: | | | | | | | | | | | | | | | | | | Accepted? | | |
|  | |  | | |  | | | | | | |  | | |  | | |  | | |
| Name Address | | | | | | | City | | | | | State | | Zip | | | |
| 6. ACT Composite Score: |  | | | | | 7. SAT Composite Score: | | | | |  | | | | | | | | | |
| **PART IX - GOALS AND CAREER OBJECTIVES** | | | | | | | | | | | | | | | | | | | | |
| ***Briefly explain your goals and career objectives:*** | | | | | | | | | | | | | | | | | | | | |
| ***Additional Comments as desired:*** | | | | | | | | | | | | | | | | | | | | |

***Additional Information as desired:***

***Thank you for your participation and good luck!***