2024

Graduating High School Senior Academic Achievement Scholarship Packet

Sponsored by: The Eglin Spouses' Club

All applications must be postmarked NO LATER THAN Thursday, 15 February 2024. (Note: Application is 13 pages total, including this cover sheet, printed single sided)

The Eglin Spouses' Club is dedicated to assisting various organizations with charitable donations and awarding college scholarships. Thanks to our hardworking volunteers of the Eglin Thrift shop, located in Bldg. 721 on Eglin AFB, the ESC is able to fund charitable endeavors such as these scholarships.

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

SSN Last 4:

EGLIN SPOUSES' CLUB 2024 GRADUATING HIGH SCHOOL SENIOR ACADEMIC ACHIEVEMENT AWARDS

The Eglin Spouses Club (ESC) annually sponsors scholarships for students who exhibit potential and desire to complete a program leading to a college degree. Financial support for these awards is provided by the Eglin Thrift Shop. Scholarship amounts will be determined by funding availability.

If additional award money is allocated, it may be distributed at the discretion of the Scholarship Committee using the eligibility and selection criteria listed below. All awards may not be given if candidates do not meet eligibility and selection criteria.

ELIGIBILITY REQUIREMENTS: At the time the scholarship application is due, students must be of good character and <u>must meet</u> the following criteria:

- 1. Planning to seek undergraduate, associate, or similar degree/diploma from an accredited 2 or 4-year college, university, or vocational-technical school; **AND**
- 2. Be a dependent of an active duty, retired or deceased military member; AND
- 3. Be in possession, or eligible for possession, of a military ID card allowing full benefits (that does not expire before 31 May 2024); **AND**
- 4. Reside within a 40-mile radius of Eglin Air Force Base **OR** be the dependent of a sponsor stationed at Eglin Air Force Base

The Scholarship Committee shall determine eligibility. A separate/independent review committee will be the final determining body for awarded scholarships. Each recipient is notified by e-mail of his or her selection. This award will be withdrawn if the recipient accepts a scholarship from another military Spouses' Club. The award will be withdrawn if the recipient fails to enroll in an institution of higher learning within six months of receiving said award.

SELECTION CRITERIA:

A) Academic record (you must have an unweighted 3.0 GPA minimum, based on a 4.0 system)

B) Test scores (SAT and/or ACT)

- C) Extracurricular activities (school, church, civic, community, employment, etc.., including leadership, honors and awards received)
- D) Student Essays
- E) Two References (Can Not Be Related)

SSN Last 4:

HIGH SCHOOL GRADUATE APPLICATION CHECKLIST

All applications must be postmarked **NO LATER THAN THURSDAY**, **15 FEBRUARY 2024**. For more information contact: scholarship.eglinspousesclub@gmail.com. Applicant will receive an email confirming acceptance of application by 21 March 2024. <u>Failure to complete these instructions correctly will result in disqualification</u>. Do NOT use pencil on this application. Please use pen or typed responses. This checklist must be initialed by each number and signed at the bottom to acknowledge that the student has included all elements in the application package. The items include:

- ___1. Completed Personal Data Sheet (Pages 4).
- ____2. Transcripts (officially sealed) from high school or any college courses completed. Note: .pdf or printed .pdf's will not be considered official.
- ___3. Counselor's Verification (page 5).
- ____4. Completed Activity Data Sheet (pages 6-8). You may make additional copies of this form, if needed, but the information submitted MUST be on this form.
- ___5. Two (2) completed recommendations. Two reference pages have been provided for you (pages 9 and 10). These references should be employers, teachers, or anyone you have contact with on a regular basis---someone who knows you and can attest to your character and may NOT be family members. Give a copy of the form to your references and ask them to return it to you in a SEALED envelope with their signature over the seal. The reference should not refer to the applicant's name or gender (like he/she, him/her). Instead use "this candidate," "this applicant," "this individual." etc. This protects your identification and ensures fairness during judging. Two references **must** be included with your completed application.
- ___6. Two Student Essays (essay questions attached on page 12):
 - Essays must be **double spaced** and typed using **Times New Roman 12pt font.**
 - **Do NOT** use your name, school, or position so that the essays may be evaluated objectively.
 - **The last 4 digits of your SSN must be placed at the bottom of the pages** for identification purposes. Without the number, your essays are not identifiable
- ___7. Certification page (page 11)
- ___8. Mail completed application (write in SSN Last 4 on bottom of each page) to:

Eglin Spouses' Club Scholarship 2024 c/o ESC P.O. Box 1862 Eglin AFB, FL 32542

___9. Initial each number on the checklist and sign the bottom of this page acknowledging that you have completed it and all components of the application have been submitted together. Failure to do so will result in DISQUALIFICATION of the application.

SIGNATURE _____

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

EGLIN SPOUSES' CLUB 2024 GRADUATING HIGH SCHOOL SENIOR ACADEMIC ACHIEVEMENT AWARDS

PERSONAL DATA SHEET

| APPLICANT'S INFORMATION | |
|---|--|
| NAME (Last, First, Middle) | |
| Applicant's Last Four (SSN): | |
| Address (Street, City, State, Zip): | Name of High School Currently Attending: |
| | E-mail address: |
| Home Phone Number: | Cell Phone: |
| SPONSOR'S INFORMATION | |
| Sponsor's Eligibility Category: (Circle) | |
| Active Duty Retired Deceased Deployed in | n High School Remote POW/MIA |
| Sponsor's Name | Rank/Grade |
| Sponsor's Organization | Sponsor's Last 4 (SSN) |
| Organization Address | Duty Phone Number: |
| | Home/Cell Phone Number: |
| Current Mailing Address (if different than applicant's) | E-mail Address: |
| | Sponsor's ID Card Expiration Date: |

How did you hear about our scholarship? (Google, Facebook, email, word of mouth, guidance counselor, other)

Did you or will you apply for another spouse club scholarship?

If so, which spouse's club?

Is a family member in the Eglin Spouses Club?

EGLIN SPOUSES' CLUB 2024 GRADUATING HIGH SCHOOL SENIOR ACADEMIC ACHIEVEMENT AWARDS COUNSELOR'S VERIFICATION

THIS PAGE ONLY IS TO BE FILLED OUT BY THE APPLICANT'S HIGH SCHOOL COUNSELOR

| STUDENT SSN | (last 4 digits) | | | | |
|----------------------|------------------|---------------|---|-------|--|
| GPA: Unweigh | ted | Weighted | | | |
| TEST SCORES: SAT: | Critical Reading | Verbal | l | _Math | |
| and/or | Total SAT score: | | | | |
| АСТ: | (highest com | posite score) | | | |

____ Check here to confirm that you have verified that the applicant's military ID is valid.

| Counselor's | |
|-------------|------|
| Signature | Date |

<u>COUNSELOR</u> – In a SEALED ENVELOPE, please attach an OFFICIAL COPY of complete High School transcripts and test scores. Please return envelope to the scholarship applicant so they may mail completed application to the address requested. Thank you very much for your help.

| SSN | Last | 4: | |
|-----|------|----|--|
| | | | |

ACTIVITY DATA SHEET (1)

Please detail your extra-curricular activities for each high school year and include best estimated total number of hours over 4 years:

*It is important that applicants provide any and all qualifying information in the application categories (Education, Employment, Community/Volunteer Service, Community/Club Activities, High School Activities, Awards/Honors). Please print out and attach additional sheets if necessary. Do not add a resume. Please see examples provided.

EDUCATIONAL DATA High schools attended grades 9-12 (Name, City, State) Dates Attended From Mo/Yr - To Mo/Yr Image: Colspan="2">Image: Colspan="2" Image: Colspan=

| Estimated Total Hours 200 150 | | s employed Yr – To Mo/Yr |
|--|-----------|-----------------------------|
| 200 | | |
| | 6/2014 | |
| | Sept/2013 | Present Present |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

TOTAL HOURS:_____

| COMMUNITY VOLUNTEER SERVICE List voluntee organizations. Verification of service may be required. go here. | | | |
|--|--|-----------------|---|
| Organization | Position/Title | Estimated | Dates Volunteered: Grades |
| o' guillation | | Total Hours | 9-12 |
| | | | From Mo/Yr - To Mo/Yr |
| eg: County Animal Shelter Special Olympics of NOVA Eagle Scout Project | Feed/wash animals Helped at track meet Rebuilt stairs for a church | 100 30 75 | October 2013-Feb 2016 July 2013, 2014, 2015 Summer 2015 |
| | | | |
| | | | |
| | | | |
| | • | • | |

TOTAL HOURS:_____

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

ACTIVITY DATA SHEET (2)

| COMMUNITY OR CLUB ACTIVITIES: List athletics, clubs or activities for high school and community . Verification of | | | | | | | |
|---|--------|--------|----------------------|--------------|--------------------------|--|--|
| participation may be required. Please place the descriptive symbol and estimated hours in the appropriate column: HS -high school Com- Community C -Captain CC -Co-Captain P -President V -Vice-President S -Secretary | | | | | | | |
| HS-high school Com-Community T-Treasurer M-Member O-H | | | ain P -Presic | tent $V-Vic$ | e-President S-Secretary | | |
| T-Treasurer M-Member O- Please state position Organization/Activity (Name) 12 th Grade 10 th Grade 9 th Grade Description | | | | | | | |
| Organization/Activity (Name) | Hours | Hours | Hours | Hours | Description | | |
| e.g., Drama Club -HS | M - 30 | M - 35 | | | Acted in 2 plays | | |
| Travel Soccer-Com | C - 40 | M - 20 | M - 20 | M - 20 | Goalie, travel team | | |
| National Honor Society-HS | P - 20 | T - 20 | M - 10 | | Participated in projects | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

TOTAL HOURS:

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

ACTIVITY DATA SHEET (3)

|)-12. Awards/Honors and Organization | DescriptionAward/Honor | | | <i>t</i> L | 9th |
|--|-----------------------------|------|------|------------------|-----|
| ····· | | 12th | 11th | 10 th | |
| .g., Athletic Letter (football, basketball, track) | Performance/participation | X | X | X | |
| Eagle Scout | Service Project | Χ | | | |
| Employee of the Quarter, Pizza Hut Store 215 | Attitude, effort, Mrg picks | X | | | |
| Ionor Roll, Edison High School 3.5 min GPA | Awarded each semester | X | X | | |
| 1ath Academic Letter | Awarded yearly, 4.0 GPA | X | | X | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Total Hours:

| INTENDED COLLEGIATE AREA OF STUDY | |
|-----------------------------------|--------|
| Major: | Minor: |
| | |

EGLIN SPOUSES' CLUB 2024 High School Academic Scholarship Application Recommendation 1

012345Rarely ObservedAbove and Beyond

- ____1. Is polite and courteous
- _____2. Possesses good decision-making skills
- ____3. Handles difficult situations well
- _____4. Demonstrates good time management (Example: turns in complete assignments promptly)
- ____5. Maintains good peer relationships
- _____6. Accepts responsibility and follows through
- _____7. Demonstrates integrity
- _____8. Is self-motivated
- _____9. Perseveres through commitment, regardless of difficulty.

Do not use applicant's name, as judging is impartial and names are not to be included.

Please give your assessment in of this applicant's potential for success in college. Indicate how long and in what capacity you have known him/her. You may use the space provided OR attach a separate piece of paper to this form.

Applicant's last 4 of SSN

Reference Name, Position, and Phone Number

Date

Writer: Please return reference form in a sealed envelope (<u>with your signature over the</u> <u>envelope seal</u>) to the applicant so that they may mail it with their completed application. Thank you.

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

EGLIN SPOUSES' CLUB 2024 High School Academic Scholarship Application Recommendation 2

012345Rarely ObservedAbove and Beyond

- ____1. Is polite and courteous
- _____2. Possesses good decision-making skills
- ____3. Handles difficult situations well
- _____4. Demonstrates good time management (Example: turns in complete assignments promptly)
- ____5. Maintains good peer relationships
- _____6. Accepts responsibility and follows through
- _____7. Demonstrates integrity
- ____8. Is self-motivated
- _____9. Perseveres through commitment, regardless of difficulty.

Do not use applicant's name, as judging is impartial and names are not to be included.

Please give your assessment of this applicant's potential for success in college. Indicate how long and in what capacity you have known him/her. You may use the space provided OR attach a separate piece of paper to this form.

Applicant's last 4 of SSN

Reference Name, Position, and Phone Number

Date

Writer: Please return reference form in a sealed envelope (<u>with your signature over the</u> <u>envelope seal</u>) to the applicant so that they may mail it with their completed application. Thank you.

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

EGLIN SPOUSES' CLUB 2024 GRADUATING HIGH SCHOOL SENIOR ACADEMIC ACHIEVEMENT AWARDS Certification

I certify that the information in the application and activity data sheet is accurate to the best of my knowledge, and my essay is entirely my own effort. I further certify that I am a military dependent in possession of a valid military ID in my name, and I meet all other ESC Scholarship Award eligibility requirements. Should I accept an ESC Scholarship Award, I acknowledge that the following restrictions apply:

1) All funds received shall be applied to tuition, books, and/or academic fees at a regionally accredited college or university. Award checks will be sent to the financial aid office at the school of your choice upon receipt of enrollment verification at full-time status and distributed by the financial aid office as needed. Scholarship recipient must provide the ESC with the name and address of the college and their student ID (no later than June 1, 2024). The award, when combined with other scholarships, may not exceed the costs of tuition, books and academic fees. If this occurs, the balance must be returned to the ESC scholarship committee as soon as possible. Students accepting service academy appointments or full scholarships (tuition, books, and fees) are not eligible to receive an ESC Scholarship Award. If the ESC Scholarship Award recipient later leaves school and is entitled to any refund of tuition or fees, he or she must notify the ESC.

2) ESC Scholarship Awards must be used within the 2024-2025 school year. The Scholarship Committee may consider exceptions on an individual basis.

3) If an applicant receives a Spouses' Club scholarship from any other base, they will be ineligible to receive an ESC scholarship (if awarded).

Should I accept an ESC Scholarship Award and violate any of these restrictions, or if I failed to meet the eligibility requirements at the time the application was due, my parents and I agree to return all award money to the ESC. Relinquished scholarship money will be dispersed at the discretion of the Scholarship Committee.

In accordance with the Privacy Act of 1974, I agree that my signature on this form will authorize the Scholarship Chairperson to release copies of my transcripts, scholarship application, social security number, and other auxiliary data to the Scholarship Committee as needed.

| APPLICANT'S NAME (Print): | |
|-------------------------------|---|
| SSN (Last 4) : <u>xxx-xx-</u> | PHONE: |
| APPLICANT'S SIGNATURE: | DATE: |
| | DATE: or deceased – Please indicate on signature line) |

Please review your application prior to mailing. Only fully completed applications will be accepted by the ESC. Failure to accurately follow directions will result in disqualification. Good Luck!

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.

EGLIN SPOUSES' CLUB 2024 GRADUATING HIGH SCHOOL SENIOR ACADEMIC ACHIEVEMENT AWARDS

Essay Questions

- Essays must be double spaced and typed using Times New Roman12pt font.
- **Do NOT** use your name, school, or position so that the essays may be evaluated objectively.
- The las 4 digits of your SSN must be placed at the bottom of the pages for identification purposes. Without the number, your essays are not identifiable.

Essay 1: Attach a typed essay of 500-600 words in length answering the following question:

If you had an unlimited amount of money, what charity would you create? Who would it benefit? Why would you choose to create it?

Essay 2: Attach a typed essay of 100-200 words in length answering the following question:

Who has been your greatest influence or inspiration?

Please include the information for the college/university you are attending to the best of your ability:

| 1.) | Student Name | |
|-----|--------------|--|
| - | | |

2.) Student ID# _____

3.) School address which the award check should be mailed to:

| Attention: | | | |
|------------|--|--|--|
| - | | | |

Address 1: _____

Address 2: _____

| City/State: | |
|-------------|--|
| 51 | |

Zipcode: ______

THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.