

National Guard Association of Arkansas/Enlisted Association of the Arkansas National Guard Scholarship Program

Post Office Box 663, North Little Rock, Arkansas 72115
Tel. 501-758-6422/1-800-522-1617

Scholarship Application

Academic Year 2012/2013

Dear Scholarship Applicant:

Thank you for your interest in applying for a *National Guard Association of Arkansas/Enlisted Association of the Arkansas National Guard (NGAA/EAANG) Scholarship*. It is indeed a privilege and pleasure to welcome your commitment to furthering your education and your interest in the *Scholarship Program*. Forty \$750 scholarships will be awarded for the academic year 2012-2013.

To ensure your opportunity of being a viable candidate for a scholarship, appearing below are some guidelines that are extremely important as you complete your application for scholarship consideration.

******* VERY IMPORTANT- PLEASE READ *******

- **You or your sponsor (if you are a dependent) MUST be a current member of the National Guard Association of Arkansas or the Enlisted Association of the Arkansas National Guard (NGAA/EAANG) (2012 association dues must have been paid).** This is not the same thing as being a member of the Arkansas National Guard. An individual's National Guard Association status may be checked by contacting his/her local unit's NGAA/EAANG representative, or the NGAA office at 501-758-6422 or 1-800-522-1617.
- **You or your sponsor MUST be covered under the group life insurance program administered by NGAA. This insurance is State Sponsored Life Insurance (SSLI) and not Servicemen's' Group Life Insurance (SGLI).** If you (or your sponsor) are not covered under the NGAA SSLI insurance program, contact NGAA at 501-758-6422 or 1-800-522-1617 for information on how to obtain coverage.
- Any military member who is also a dependent of an NGAA/EAANG member must be an NGAA or EAANG member and participate in the NGAA insurance program on his/her own. You must apply as a member, not a dependent.
- Dependents of deceased members of NGAA/EAANG may apply if the deceased member had coverage under the NGAA group life insurance program.
- **All spaces on the application should be completed.** If a section does not apply, simply print or type N/A (not applicable) in the space.
- Parts IV through VII are important and each should be carefully considered and completed to the best of your ability.
- Part VIII, Items 1c, 2c, or 3c (applicant's most recent GPA percentage) and Items 6 & 7, (ACT/SAT scores) are very important -- make sure you provide this information.
- Applications should be neatly printed or typed, preferably typed.
- Applications must be postmarked by the deadline noted on the application, with no exceptions.

The above information is very important and will help you toward being a more viable candidate in your search for financial assistance to pursue your educational goals. Best wishes in your educational endeavors both now and in the future.

NGAA/EAANG Scholarship Program

Application for Scholarship, Academic Year 2012/2013

P.O. Box 663

North Little Rock, AR 72115

ELIGIBILITY:

NGAA/EAANG members (both active and retired Arkansas National Guard members) that are covered under the NGAA group life insurance program (SSLI), their dependents, and dependents of deceased NGAA/EAANG members that were covered under the NGAA group life insurance program are eligible to apply for scholarships awarded by the *NGAA/EAANG Scholarship Program*.

Deadline for submission of applications is **January 15, 2012**. Applications must be received (or be postmarked) by the *NGAA/EAANG Scholarship Program*, P.O. Box 663, North Little Rock, AR 72115, by that date. Envelopes should be marked on the outside with "Scholarship Application".

APPLICATION: Use a separate sheet of paper if necessary to provide additional information for all of the below categories:

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|---------------------------------|---------------------------------|--------------------------------------|
| Part I: Applicant Information | Part II: Sponsor 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. 2012 NGAA/EAANG Yes <input type="checkbox"/> No <input type="checkbox"/>	
7. Current member of the Arkansas National Guard Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list unit/rank/phone: Unit: _____ Rank: _____ Phone No. _____						
8. Self or sponsor participant in NGAA insurance program? Yes <input type="checkbox"/> No <input type="checkbox"/>						
9. Check correct academic level:						
<input type="checkbox"/> High school student expecting to attend college full-time/part-time in the fall semester.						
<input type="checkbox"/> Currently enrolled in undergraduate college and expecting to continue full or part-time in the fall semester.						
<input type="checkbox"/> Working on post-graduate degree.						

PART II - SPONSOR INFORMATION (If applicable)

1. Sponsor name and address:						
Last	First	MI	Street	City	State	Zip
2. Relationship to applicant:		3. Rank or last rank held		4. Branch: Army <input type="checkbox"/> Air <input type="checkbox"/>		
5. Sponsor's current status: Active <input type="checkbox"/> Retired <input type="checkbox"/> Deceased <input type="checkbox"/>			6. Phone No:	7. 2012 NGAA/EAANG member? Yes <input type="checkbox"/> No <input type="checkbox"/>		
8. Current unit & Phone No:				9. E-Mail Address:		

PART III - FINANCIAL INFORMATION (Applicant)

1. Occupation:		
2. Expected income in 2012: Over \$10K <input type="checkbox"/> Under \$10K <input type="checkbox"/>		3. Number of dependent children:
4. Estimated amount of tuition, room and board, and other fees:		

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

PART V - COMMUNITY SERVICE

List all community service performed while in high school and college:

ORGANIZATION	ACTIVITY PERFORMED	NO. YEARS

PART VI - EXTRACURRICULAR ACTIVITIES AND AWARDS

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 From: To:	Reason for Leaving:
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PART VIII - ACADEMIC INFORMATION

1. Name and address of high school graduated:

Name	Address	City	State	Zip
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1a. Years attended From: To:	1b. Graduation Date:	1c. GPA:
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2. Name and address of college(s) attended:

Name	Address	City	State	Zip
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2a. Years attended From: To:	2b. Graduation Date:	2c. GPA:
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3. Name and address of college(s) attended:

Name	Address	City	State	Zip
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3a. Years attended From: To:	3b. Graduation Date:	3c. GPA:
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4. Name and address of colleges to which applied:

Name	Address	City	State	Zip
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Accepted?

5. Name and address of colleges to which applied:

Name	Address	City	State	Zip
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Accepted?

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:

Thank you for your participation and good luck!