

Virginia National Guard Association

Scholarship Application

Name: _____ SSN: _____
Last First MI

Mailing Address: _____ Phone #: _____

College/University Attending: _____

Address: _____

Number of Semester/Qtr Hrs Completed: _____ GPA: _____ Major: _____

Are you a member of the National Guard? _____ If yes-rank/grade: _____ Unit: _____

Unit Address: _____ Unit Phone: () _____

Are you a current paid member of the VNGA? _____ If yes, Membership # _____

Are you a dependent son/daughter/spouse of a current/retired/deceased officer/warrant officer? _____

Are they a current paid member of the VNGA? _____ If yes,
Membership # _____ Name: _____

Briefly describe your educational and/or military objectives: _____

Have you previously applied for a VNGA scholarship? _____ Date: _____ Amount Awarded: _____

Are you presently receiving any other educational assistance? _____ Type/Amount: _____

List any positions of leadership you have had or now hold: _____

List any honors you have been awarded: _____

Provide a brief statement of your financial need: _____

****IMPORTANT - COMPLETE APPLICATIONS MUST INCLUDE THE APPLICATION FORM, A TRANSCRIPT OF ALL COLLEGE WORK, AND A LETTER OF RECOMMENDATION FROM A FACULTY MEMBER. INCOMPLETE PACKAGES WILL NOT BE CONSIDERED.**

**ALL DOCUMENTS SHOULD BE MAILED NOT LATER THAN 30 SEPTEMBER TO:
VNGA SCHOLARSHIP COMMITTEE, 5901 Beulah Road, Sandston, VA 23150**

Date: _____

Signature of Applicant: _____