



Veterans Memorial Center
Educational Scholarship Program
(For School Year 2020 – 2021)
Application / Eligibility Form

First Name _____ **(MI)** _____ **Last Name** _____

Current Address _____ **City** _____

State _____ **Zip** _____ **Home Phone #** _____ **Cell Phone #** _____

- A. Are you a veteran or are you currently a member on active duty with one of the following US Armed Forces? Army-Navy-Air Force-Marine Corps or Coast Guard, YES ___ NO ___? If yes, list the service and current organization, duty station and/or ship to which assigned:

Are you a member of a Reserve Component or State National Guard Unit of one of the above US Armed Forces, YES ___ NO ___?

If you are qualifying under paragraph A, you must attach a copy of your DD 214 or current orders assigning you to one of the US Armed Forces shown above.

- B. Should you not qualify by being a member of an organization as described in paragraph A, you may qualify if you have a family member who may act as your sponsor if he/she was or is a member of a unit shown in A above. Any member of your immediate family may act as your sponsor (**CIRCLE ONE**): **father, mother, sister, brother, grandfather, grandmother, aunt, uncle, stepfather, stepmother, or guardian**. You or your sponsor must be a Brevard County, Florida registered voter currently living in Brevard County, Florida. If you use a sponsor to qualify, attach a copy of the DD form 214 or other military documents, discharges or assignment orders supporting their service in one of the US Armed Forces shown above. Also provide your sponsor's current address and a copy of their voter registration card. If the sponsor is no longer living, then documentation (such as death certificate) needs to be provided to verify Brevard County residence at time of death.
- C. **SPECIAL CATEGORY ROTC APPLICANTS.** Individuals who are not a member of one of the organizations shown in paragraph A may qualify by being a member of either a Junior or Senior ROTC program. You may apply if you are a Florida resident who is currently enrolled as a student in the last two years of a high school junior ROTC program or you are currently enrolled in the first two years of a college ROTC program. You must provide a

letter signed by the ROTC instructor supporting the fact that you are enrolled in the ROTC program outlined above. You must provide a copy of your Florida Drivers License.

- D. All applicants for this Scholarship program must have graduated from a high school on or before **August 1, 2020**. In lieu of a High School diploma, a GED test certificate is acceptable as having graduated from a high school.

- E. ALL APPLICANTS MUST BE ENROLLED IN OR ACCEPTED FOR ENROLLMENT AS A FULL-TIME STUDENT FOR 12 OR MORE SEMESTER HOURS in one of the following accredited institutions of higher learning:
 - 1. Two Year Technical College
 - 2. Two Year Junior or Community College
 - 3. Four Year College
 - 4. Graduate School (if a full time Graduate student, there can be fewer than 12 hours in the requirements above, but it needs to be documented)

Please provide a copy of the letter of acceptance for enrollment in the school for the school year **2020-2021**. If you are currently enrolled in one of the institutions shown above, please include with this application copies of your current transcripts which show your current grade point average (or letter grade) for this past school year.

If you graduated from high school before **August 2020** and are not currently enrolled in one of the institutions listed above, attach a copy of school documents which indicate what your grade point average (or letter grade) was when you last attended school after graduating from high school. Your grade point average must have been 2.5 or higher.

- F. On ONE SHEET OF PAPER, submit your views as to how this scholarship will assist you in meeting your educational goals.

- G. Should you desire to submit letters of recommendation from any source – please do so.

- H. It should be noted that while we may receive several applications from members of one family: **only one family member may receive a scholarship per year.**

Print Name

- I. Have you submitted applications for additional grants or scholarships? If NO ____, go to **J**. If YES ____, please provide the following information for each grant or scholarship **received or pending (note which)**:
 1. Name of grant or scholarship,
 2. Period covered by grant or scholarship,
 3. The amount of award you have received to date,
 4. Indicate if you are required to repay any or all of the amount received or will receive during the year **2020**.

- J. Your application with all supporting papers **must be bound securely so it will not come apart. In addition, place your full name on either the top or bottom of each page submitted with your application.**

- K. DO NOT SUBMIT ORIGINALS OF SUPPORTING MILITARY OR COLLEGE DOCUMENTS. ONLY COPIES SHOULD BE SENT WITH YOUR APPLICATION.

- L. IF YOU WERE AWARDED A VMC SCHOLARSHIP DURING **2019** YOU WILL NOT BE ELIGIBLE THIS YEAR. YOU MAY APPLY AGAIN FOR THE SCHOOL YEAR **2021**.

THE NUMBER AND VALUE OF SCHOLARSHIPS TO BE AWARDED WILL DEPEND ON THE FUNDS AVAILABLE.

You have completed the application and are now ready to mail it in. WE RECOMMEND YOU **REVIEW YOUR APPLICATION USING THE FOLLOWING CHECK LIST:**

- () Copies of your or your sponsor's US military documents; voter registration, driver's license or other photo documents which may support your application listed in **A-C**
- () If applying as a SPECIAL ROTC CANDIDATE, letter from your ROTC instructor indicating that you are enrolled in a ROTC program as described in **C**
- () GED Certificate, if applicable, as described in **D**
- () Copy of letter of acceptance into one of the institutions of higher learning listed in **E**
- () Copies of current grade transcripts listed in **E**
- () Statement on a SINGLE SHEET OF PAPER how this scholarship will assist you in meeting your goals, as described in **F**

Print Name

- () Letters of recommendations that you may have received supporting this application as described in **G.** (optional)
- () Required information on grants and scholarships listed in **I**
- () Placed your name on either the top or bottom of each page, including attachments
- () Bound your application and supporting documents securely
- () **Remember** your completed scholarship application must be delivered to the VETERANS MEMORIAL CENTER OFFICE TO THE MANAGER ON DUTY AT 400 Sykes Creek Parkway, Merritt Island, Florida, (321) 453-1776. You application must arrive **NOT LATER THAN ONE O’CLOCK Friday, July 6, 2020.** FAXED APPLICATIONS WILL NOT BE ACCEPTED AND NO ACTION WILL BE TAKEN WITH ANY THAT ARE RECEIVED.

DON’T LET YOUR EFFORT BE WASTED. TAKE THE TIME AND READ THE APPLICATION FULLY. ANSWER ALL OF THE QUESTIONS. EXPERIENCE HAS SHOWN THAT THE MAJORITY OF THE APPLICATIONS THAT ARE NOT SELECTED WERE BECAUSE THEY DID NOT TAKE THE TIME TO READ AND RESPOND TO EACH QUESTION ASKED IN THE APPLICATION.

Should you have any questions, call Doris Hendricks at (321) 458-1138 or Dean Schaaf, at the Veterans Memorial Center (321) 453-1776 ext 5.

Print Name