

****DUE No Later Than: 30 APRIL****

National Guard Association of Arizona Scholarship

(Please Type or Print)

Name: _____

Street address (including _____

City, State and Zip Code): _____

Daytime phone: _____

Status: (check one) Enlisted Applicant Officer Applicant Dependent Applicant

Unit of Assignment (Soldier's or parent/spouse's, if applicable): _____

High School anticipated graduation date (if applicable): _____

Cumulative grade point average for high school or college (on a 4.0 scale/2.5 minimum): _____

School that you plan to attend: _____

Degree sought: _____

Anticipated credit hours with period: _____

How do you plan to apply your education (your professional goals)? _____

Place of employment (if applicable): _____

Length of employment: _____ Do you plan to be employed while attending college? _____

If so, how many hours per week? _____

Yearly income of family: \$_____ Number of people supported by this income: _____

Explain your financial need:

Why did you (or your parents/spouse) join the Arizona National Guard?

What is the role of the Arizona National Guard?

How do you see the Arizona National Guard assisting you in the future?

What community service have you recently been involved in (through clubs, organizations, etc.)?

Please explain your participation and who benefited as a result of your involvement.

By signing below, you attest that all the information provided above is accurate. Any false statements may result in disqualification. If you are awarded the scholarship and it is discovered that you have provided untrue information, you will be responsible for repayment of all awards received.

Signature _____ Date _____

Mail your completed application along with two letters of recommendation and memorandum of verification of good standing (or retirement order, as applicable) from the first commander in your or your parent/spouse's (for dependent students) chain of command to:

NGAAZ
Attention: Scholarship Committee
5640 East McDowell Road
Phoenix, AZ 85008