

Scholarship Application
Enlisted Association of the National Guard of Tennessee
(To be completed by all applicants)

This application is for the ____ Academic ____ Technical Scholarship (Check one)

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- (Last 4 digits of SSN of Guardsman) (Applicant's ACT Score) (Date)
1. -----
(Name and address of Applicant)
2. -----
(Name, Rank, Address, and Telephone Number of Parent or Guardian)
3. -----
(Parent or Guardian Unit and Unit Address)
4. -----
(If Applicant in National Guard, Unit and Address)
5. -----
(Expiration date of enlisted parent/guardian/spouse/member)
6. Current status of Applicant (check one): High School College Business Technical School
Working if in school or college, name the school or college and grade or term.

7. List recent student activities in which you have participated: -----

8. List offices to which you have been elected in any organization: -----

9. List honors (scholastic, athletic, citizenship, etc.) which have been awarded to you: -----

10. School or college you wish to attend and why (use additional sheet if necessary): -----

11. Number of school age children in family: Elementary High School College
12. Have you received any other scholarships to date? ____ If so, specify: -----

If additional space is needed to answer questions, you may use a separate sheet and attach.

I have answered the above questions to the best of my knowledge and belief.

(Signature of Applicant)

(Signature of Parent or Guardian)

