APPLICATION#\_\_

FOR OFFICE USE ONLY

STATUS

IAME

AMVETS

# Ohio AMVETS Service Foundation Scholarship Application

Reset Form

## **INSTRUCTIONS**

The Ohio Scholarship program provides opportunities for advanced education for veterans or dependents of veterans who desire to attend an institution of higher learning. The Ohio AMVETS Service Foundation Scholarship Award is based upon the applicant's scholastic aptitude and demonstration of financial need. Therefore, no applications will be accepted by students who have less than a 2.5 grade point average on a 4.0 scale, or the equivalent.

The Ohio AMVETS Scholarship is available to veterans, children of veterans, grand children of veterans or husbands/wives of veterans. The scholarship program is for graduating high school students and/or adults who are entering a course of study at an accredited college or university. The scholarship is awarded in the total amount of \$1000.00, payable in full and only applied toward the student's tuition. AMVETS does not discriminate against persons because of age, race, color, creed, religion, disability, gender, ethnic background or national origin.

Scholarships will only be awarded for attendance at an accredited college or university. A minimum of ten scholarships will be awarded each year. This is a one-year scholarship, all applicants must apply or reapply annually.

### **ALL APPLICANTS:**

The following items MUST be received by this office with your application to be considered by the Service Foundation Board:

- 1. Copy of eligible veteran's DD214 or discharge certificate indicating 'honorable' separation.
- 2. Brief autobiographical statement outlining why you desire the AMVETS scholarship and what your projected goals are in life.
- 3. Transcript of high school grades and (if currently in college) current college transcript.
- 4. A good quality, black and white or color photo.

FAILURE TO SUBMIT THE AFOREMENTIONED ITEMS PRIOR TO APRIL 1 WILL BE CAUSE FOR DISQUALIFICATION OF YOUR APPLICATION.

	TYPE OR PRINT	ALL INFORMATION	
NOIL			☐ Mr. ☐ Mrs. ☐ Miss
Last Name  Address  City	First Name	Middle Initial	Indicate one
Address			
City	\$	State	Zip Code

High School Phone with area code STUDENT EDUCATIONAL INFORMATION Address City State Zip Code Graduation date Grade Point average Class rank Number in class List honors and distinctions: **COLLEGE/UNIVERSITY** College you attend or plan on attending Phone with area code Address City State Zip Code Grade Point average - most recent transcript This is my year of college I am eligible for the OHIO AMVETS SERVICE FOUNDATION SCHOLARSHIP due to honorable service in the Armed Forces of the UNITED STATES OF AMERICA by the following family member(s): **VETERAN INFORMATION** Myself Parent Spouse Grandparent (check all applicable) Name of veteran you are applying under Phone with area code Address City State Zip Code

# STUDENT FINANCIAL STATEMENT

# PARENTAL FINANCIAL STATEMENT

List any grants or scholarships you will receive and their value	ue:
1	2
3	4
1. Total monetary value of all scholarships and grants	1. \$
2. Amount of financial aid you will receive from your family	2. \$
3. Amount you have saved for your education	3. \$
4. Total of any other financial support you will receive	4. \$
5. Total FINANCIAL SUPPORT available (add lines 1 thru 4)	5. \$
6. Are you, as a student, listed as a dependent on your parents' income tax return?	6. YES NO
7. List the name of your or your spouse's employer	7
List your adjusted gross income from your most recent federal income tax return	8. \$
8a. If married and filing separately, list your spouse's adjusted gross income	8a. \$
If you answered <b>yes</b> to line 6 above or if line 2 above was gr	eater than \$0, this section must be completed.

Father's n	ame	Marital status	Phone with area code		
Address					
City		State	Zip Code		
Mother's n	ame	Marital status	Phone with area code		
Address (p	out same if parents live in same hou	usehold)			
City		State	Zip Code		
	arents' adjusted income from their i ome tax return				
List adjuste	ed gross incomes, if parents file se	parately \$	\$		
	one in your immediate family, other ling an accredited college or univer		ES NO		
	answered <b>yes</b> to the above quest students in your immediate family o		he following questions, which pertain to		
А	. How many individuals in your im accredited college or university?		g an		
В	. Is (are) the student(s) in your im scholarship?	Is (are) the student(s) in your immediate family receiving an AMVETS scholarship?			
С	. Is (are) the student(s) receiving	Is (are) the student(s) receiving any financial aid?			
D	. What is the total amount of finan	ıcial aid?			

## SELECTIVE SERVICE: (Male only)

All 18 year old males are mandated	d by law	to register with the Selective Service System.					
I have have not complied submitted.) However, I will register verification is required.		s law (if under 18 at time of application is(enter date). Submission of					
PUBLICITY RELEASE							
authorize the AMVETS Departmen	nt of Ohi	election of the recipients is made, I hereby o, its agents and representatives to use my tions relative to the Service Foundation					
Date	Applica	nt's signature					
COMPLETE ALL QUESTIONS AND RETURN TO AMVETS DEPARTMENT OF OHIO.  DON'T FORGET TO ENCLOSE:   * sponsoring veteran's DD214 or discharge  * grade transcript(s)  * picture (good quality black and white or color)  * autobiographical statement							
PLEASE MAIL, FAX OR EMAIL TO THE FOLLOWING:							
SUBMIT TO:	EMAIL: FAX:	admin@ohamvets.org 614-431-6991					
	MAIL:	AMVETS Department of Ohio 1395 E. Dublin Granville Rd. STE 222 Columbus, OH 43229-3314					