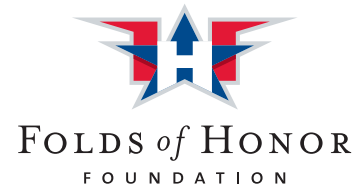


IMMEDIATE USE, RE-APPLY, TRANSITION SCHOLARSHIP APPLICATION



SERVICE MEMBER INFORMATION

Name: _____
Last
First
Middle

Branch of Service: _____ Unit: _____ Rank: _____

Please check all that apply:

Wounded in action Disabled in the line of duty Killed in Action Killed in the Line of Duty POW/MIA Purple Heart

VA Disability Rating: _____ Casualty/Incident Date: _____ Location: _____

Email: _____ Phone: _____

PARENT/EMERGENCY CONTACT INFORMATION

Name: _____
Last
First
Middle

Address: _____ Email: _____

City: _____ State: _____ Zip Code: _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

DEMOGRAPHIC INFORMATION (Response to this inquiry is voluntary and will not be used in a discriminatory fashion.)

- | | |
|---|---|
| <p>1. Ethnicity: Please check only one:</p> <p>Hispanic/Latino</p> <p>Not Hispanic/Latino</p> <p>Decline to identify</p> | <p>2. Please check all that applies to you:</p> <p>Alaskan Native/Native American* Asian</p> <p>Black/African American Native Hawaiian/Pacific Isla</p> <p>White Decline to identify</p> |
|---|---|

*3. Tribal Affiliation: _____

OTHER INFORMATION

How did you learn of FHF scholarships? _____

Names of any other service member's dependents:

First Name	Last Name	Date of Birth	FHF Scholarship Recipient

Privacy Release of Information:

I give permission to Folds of Honor Foundation to use our family's story and photos for the purpose of promoting Folds of Honor scholarship programs.

Yes No

Comment:

IMMEDIATE USE, RE-APPLY, TRANSITION SCHOLARSHIP APPLICATION



SCHOOL INFORMATION

Name of current school: _____ Cum GPA: _____
(If diploma attained via GED, indicate City/State obtained)

Name of institution for scholarship: _____ Cum GPA: _____
(Where you plan to enroll or are currently enrolled) (If applicable)

Address: _____ City: _____ State: _____ ZIP: _____

Is this an online institution? Yes No Student ID Number: _____

Have you been accepted? Yes No What is your intended major field of study? _____

What Class will you enter next Fall? Freshman Sophomore Junior Senior Other _____

Number of hours enrolled:

Fall Semester: Full-time (12+ hours) Part-time (under 12 hours)

Spring Semester: Full-time (12+ hours) Part-time (under 12 hours)

Summer Session: Full-time (12+ hours) Part-time (under 12 hours)

Estimated financial needs for this year of school:

(Please note: transportation, child care and other expenses that are not direct educational expenses should not be listed.)

Tuition	\$
Fees	\$
Books	\$
Room and/or Board	\$
Other Expenses (Please describe):	\$
TOTAL ESTIMATED COST OF SCHOOL:	\$

Financial Assistance Received:

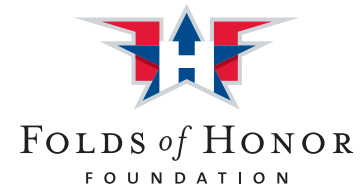
Other Scholarship Awards Received, Tuition waivers, etc.	\$
Other Financial Assistance Received (Pell Grants, etc.)	\$
TOTAL FINANCIAL ASSISTANCE RECEIVED:	\$
UNMET FINANCIAL NEED (DIFFERENCE BETWEEN COSTS & FINANCIAL ASSISTANCE):	\$

I have read the application instructions and eligibility requirements and understand my responsibility to provide information, follow submission procedures and meet deadline requirements.

Applicant Signature (Do not print) _____ Today's Date _____

Applicant (Printed Name) _____ Today's Date _____

IMMEDIATE USE, RE-APPLY, TRANSITION SCHOLARSHIP APPLICATION



PERSONAL ESSAY

The essay may be only one page in length and should include the following:

- **Paragraph 1: Short Bio (include your hometown, chosen educational institution and field of study);**
- **Paragraph 2: Briefly describe the circumstances surrounding the service member's disability or death;**
- **Paragraph 3: What would this scholarship mean to you and how will it help you achieve your career goals?**

IMMEDIATE-USE APPLICANT: Highlight areas, such as your academic, extra-curricular, and community service accomplishments, any part-time jobs, travel or hobbies that may relate to your career goals, as well as obstacles already overcome in pursuit of your goals. Discuss any financial hardships you face. We ask that your essay be computer prepared or hand printed. If you do not use this page for your essay, please write and sign a statement exactly like the one below.

RE-APPLY APPLICANT: Tell us about an accomplishment, struggle and/or lesson you learned this year in school. If your semester GPA was below a 2.0, please explain why it dropped and what you are doing to improve your grades this semester. (You are not eligible for the award if you have two consecutive semesters with below a 2.0). Also, explain any financial hardships that you face in obtaining your goals.

I declare that this essay is my own work, and all the information in my application is, to the best of my knowledge, correct.

Signature _____

Date _____