

1. HE Applicant Information

<p>*</p> <p>Did the applicant/student receive funds from the Folds of Honor HIGHER EDUCATION Scholarship for the 2018-19 academic year?</p>	
<hr/> <p>Applicant Information - Higher Education Scholarship</p> <hr/> <p><i>Please answer the questions in this section with the STUDENT information: (for Folds of Honor purposes, the STUDENT is the APPLICANT)</i></p>	
<p>* Applicant's FIRST NAME: (student applying for the scholarship) (DO NOT USE HYPHENS OR EXTRA SPACES! Example: John Michael TurnerSmith)</p>	
<p>* Applicant's FULL MIDDLE NAME: (enter "NO" if student does not have a middle name) (DO NOT USE HYPHENS OR EXTRA SPACES! Example: EmmaElizabeth)</p>	
<p>* Applicant's LAST NAME: (DO NOT USE HYPHENS OR EXTRA SPACES! Example: SmithThompson)</p>	
<p>Suffix:</p>	
<p>* Did the applicant/student dependency information change from 2018-2019 application?</p>	
<p>* Relationship to service member:</p>	
<p><i>DEPENDENCY NOTE:</i> <i>If applicant is step-child:</i> must provide an official copy of the marriage license between birth parent and service member as well as Proof of Dependency Document for applicant/student. <i>If applicant is adopted:</i> must provide copy of legal adoption document as well as Proof of Dependency Document for applicant/student. <i>If applicant is legal ward:</i> must provide copy of legal document verifying custody/guardianship as well as Proof of Dependency Document for applicant/student.</p>	
<p>* <u>REQUIRED UPLOAD 1: Proof of Dependency Document:</u></p>	

<ul style="list-style-type: none"> Dependent military ID (must include BOTH sides and list service member student is applying under) <p>*REMINDER: each upload bar only holds one file (scanned page) per bar*</p>	
<p>Additional Proof of Dependency Document Upload:</p> <p>*REMINDER: each upload bar only holds one file (scanned page) per bar*</p>	
<hr/> <p><i>IMPORTANT DEMOGRAPHICS QUESTIONS:</i> <i>The questions below are important to help us better serve the needs of our families. Please answer the questions as they pertain to the applicant/student in which you are completing the application on behalf of.</i></p>	
<p>*Applicant's Gender:</p>	
<p>*Applicant's Date of Birth: (MM/DD/YYYY)</p>	
<p>*Are you a first-generation college attendee?</p>	
<p>*Family Economic Status: (Optional)</p>	
<p>*Annual Household Income:</p>	
<p>*Applicant's Ethnicity:</p>	
<p>Tribal Affiliation: (if applicable)</p> <hr/>	
<p>*Did your address change from your 2018- 2019 application?</p>	
<p>*Do you have an International Address? (answer 'NO' if you live in Puerto Rico, Guam, Northern Mariana Islands, United States Virgin Islands and American Samoa)</p>	

* Applicant's Street Address: (Include Apt. #)	
* Applicant's City:	
* Applicant's State:	
* International Country/Province:	
* Applicant's Zip:	
* Phone Number: (XXX-XXX-XXXX)	
* International Phone Number:	
* Email Verification: (<i>MUST be the same email address used to log into this account</i>)	
<p>EMAIL NOTE: <i>The email used to log into this application account is where ALL communication regarding this application will be sent. This email should be checked REGULARLY! If your primary contact email or any other contact information changes, it is YOUR responsibility to go to the "Scholarships" page of our website, foldsofhonor.org, to find instructions for updating your contact information. Instructions can also found on the landing page of this system, fohscholarships.communityforce.com.</i></p>	
<p>Please proceed to School Information Section.</p>	

SAMPLE

2. HE School Information

* Type of funding applicant is requesting:	
<hr/> <p>Educational Institution Information - Higher Education Scholarship</p> <hr/> <p><i>Please answer the questions in this section with the Educational Institution information: (for Folds of Honor purposes, the EDUCATIONAL INSTITUTION is the University, College, Community College, Technical Program or Certificate Program)</i></p>	

<p>*Name of Educational Institution: <i>(Important Note: Please type the full name of the university, college, community college, technical school OR certificate school without abbreviations.)</i></p>	
<p>*Street Address or P.O. Box: <i>(Important Note: Please make sure you are providing the billing address where payments are received, not the physical address.)</i></p>	
<p>*City:</p>	
<p>*State or U.S. Territory: <i>(Country, if an international address)</i></p>	
<p>*Zip:</p>	
<p>*Educational Institution Phone Number: (XXX-XXX-XXXX)</p>	
<p>*Educational Institution Website:</p>	
<p>*Name of Contact Person at Educational Institution:</p>	
<p>Email of Contact:</p>	
<p>*What grade level will applicant/student enter in <u>Fall 2019</u>?</p>	
<p><i>Please proceed to Service Member Information Section.</i></p>	

SAMPLE

3. HE Service Member Information

<p>Service Member Information - Higher Education Scholarship</p> <hr/> <p><i>Complete this section with information about the service member the student/applicant is a dependent of.</i></p>	
<p>*Has the service member information changed from the 2018-2019 application?</p>	

*Is the service member deceased?	
*What is the deceased service member's classification?	
*What is the service member's classification?	
**Upload proof of service document; must be a DD1300:	
**Upload proof of service document; must be a DD214 form 4	
Additional upload proof of service document (DD214):	
**Upload Active Duty Assignment documentation:	
Additional upload Active Duty Assignment documentation:	
**Upload Purple Heart letter/certificate/document: MUST PROVIDE DOCUMENTATION IF CLASSIFICATION IS ACTIVE DUTY.	
**Upload VA Benefit Summary Letter that shows at least 10% service-connected disability; MUST BE REQUIRED FORM AS NOTED IN INSTRUCTIONS ABOVE: <i>*(Deceased post-separation classification must upload VA Benefit Summary Letter that shows last service-connected disability rating.)</i>	
Additional VA Benefit Summary Letter Upload:	
What is the service member's <u>Combined Service-Connected Evaluation</u> (disability percent) <u>from service member's current VA Benefits Summary Letter?</u> Select the "COMBINED SERVICE-CONNECTED EVALUATION PERCENTAGE" that <u>matches</u> what is listed on the VA BENEFIT SUMMARY LETTER. <i>(Please select last combined service-connected evaluation percentage for</i>	

deceased post-separation classification.)	
*Does/Did your service member have a documented Purple Heart?	
**Upload Purple Heart letter/certificate/military document: MUST PROVIDE STATED DOCUMENTATION	
*Does/Did your service member suffer from the loss of a limb? (major limb; hand, arm, foot, leg)	
**Upload loss of limb documentation; MUST BE MEDICAL OR SERVICE DOCUMENT.	
*SERVICE MEMBER'S FIRST NAME:	
*SERVICE MEMBER'S MIDDLE NAME (enter "NO" if no middle name):	
*SERVICE MEMBER'S LAST NAME:	
*SERVICE MEMBER'S GENDER:	
*SERVICE MEMBER'S BRANCH OF SERVICE:	
If additional service was completed and the service member's rank changed from what is reflected on the DD214, official military documentation is required to support this. - ie. service member's military ID.	
*TOTAL YEARS OF MILITARY SERVICE: (MUST MATCH YEARS ON THE DD214)	
Additional years of service upload:	
<i>Please proceed to Essay Questions Section.</i>	

4. HE Essays

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Essay Questions - Higher Education Scholarship

Complete this section with answers as they pertain to the student/applicant and the service member in the application. The questions are intended for Folds of Honor to learn more about you and your service member (and family). Please share as much as you are comfortable sharing. These types of answers are extremely helpful when special opportunities may become available.

*

In 1-2 paragraphs, tell us about your service member. The first paragraph should be about the service member's military career and achievements. What was their job? Did they receive honors, awards or decorations? The next paragraph should be about your service member as a parent and person. Please add any other information you'd like to share about the service member.

*

In 1-2 paragraphs, please tell us about yourself. What makes you special and unique? What would your friends tell us about you? What would your family tell us about you? What impact has the service member had on you? Please add anything additional you would like to share about yourself.

*

In 1-2 paragraphs, please tell us what you think you would be doing at this point in your life if you did not have the benefit of college or education? If you're offered a scholarship from Folds of Honor, how will it help you in your academic journey? How does it impact your educational decisions?

5. HE Survey Questions

Survey Questions - Higher Education Scholarship

Complete the questions in this section according to the interests of the student/applicant.

My interests include:

**My interests include:*

I give permission to Folds of Honor to use my (and/or our family's) name, story and/or photo(s) for the purpose of promoting the Folds mission. This may include any or all of the following: social media outlets, brochures, events, and/or news outlets.

**Response:*

I am interested in attending special events on behalf/in honor of Folds of Honor:

**A Folds of Honor representative will contact you for your availability should an event be scheduled in your area.*

**Response:*

Folds of Honor is honored to receive generous gifts from corporate partners. Without these valuable partnerships, many of our scholarships would not be possible. Oftentimes, the donor would like to be connected to the scholarship recipient whom they help fund. If offered an award and matched to a corporate donor, do you give permission to Folds of Honor to share your contact details with the matched donor?:

**Response:*

Do you give permission to Folds of Honor staff to discuss your account with your parents or other authorized individuals who call/email on your behalf? *If yes, please list the full names below (separated by commas) of the authorized individuals.

**Response:*

**Enter names, separated by commas:*

SAMPLE

<hr/> Required Electronic Signature <hr/>	
<i>By entering this digital signature, I am confirming all responses selected above.</i>	
*Signature:	

6. HE Application Review

<hr/> Application Review - Higher Education Scholarship <hr/> <p><i>Please read each of the statements in this section carefully. If you have questions, please visit the scholarships website (www.foldsofhonor.org/scholarships) and review the application information and FAQ's or email the scholarships department at scholarships@foldsofhonor.org for clarification before submitting the application.</i></p>	
* 1. I understand that <u>each</u> document upload bar can only hold one file per bar. I have clicked the gray "Preview Application" button on the dashboard and reviewed every document in the application; ensuring the documents are what is required, contain all necessary information, and all pages are uploaded and viewable. <i>*To preview your application for review, click "Return to Dashboard" at the bottom of the page. On your dashboard, in the upper, right-hand corner you will see a white drop-down button labeled "Choose Action" (next to the red "Final Review and Submit" Button). Click the Choose Action button and you will see "Preview Application" button; click it. This action will initiate a new window of your entire application for you to review. It does NOT include the uploaded documents. Please ensure you have included the required documents where applicable.</i>	Yes-I have reviewed my information.
* 2. I have uploaded the correct, required dependency document(s) : <i>BOTH</i> sides of a <i>current</i> , dependent Military ID card that shows the service member as the sponsor. (If the service member is NOT listed on either of these documents, additional documentation <u>is required</u> to prove dependency.) *If applicable, I have uploaded the additional documentation that's required for step children, adopted children or legal dependents/wards.	Yes-I have uploaded all required documentation.

<p>*</p> <p>3. I have uploaded the correct, required service member document(s): Proof of Service - DD214/DD1300 OR current Active Duty assignment; Proof of Disability - a <i>current year (or final)</i> VA Benefits Summary Letter that verifies the service member's "combined service-connected evaluation" percentage OR Purple Heart documentation; supplemental documents for Purple Heart or loss of limb verification. Other military documentation will not be accepted.</p>	<p>Yes-I have uploaded all required documentation.</p>
<p>*Applicant's FULL NAME: (student applying for the scholarship) (DO NOT USE HYPHENS OR EXTRA SPACES! Example: John Michael TurnerSmith)</p>	
<p>*I've read and understand each of the above statements; I'm ready to sign and submit the application.</p>	<p>I understand-proceed to digital signature.</p>
<p>_____ Signature of Applicant _____</p>	
<p>By signing this review, I understand it is my responsibility to follow all the rules and guidelines outlined above and within the application. I have completed this application, to the best of my knowledge, with complete and current information. I understand that I cannot make any changes once the application has been submitted.</p>	