

# Freeport Chapter VietNow

P.O. Box 323 Freeport, Il. 61032

815-232-7954

## Jerry L. Pool Memorial Scholarship Application

For \_\_\_\_\_ Spring \_\_\_\_\_ Fall \_\_\_\_\_ Winter Semester

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This scholarship consists of a maximum of \$600.00 each semester for tuition

Fees, books and supplies. The recipient must be:

1. Enrolled as a full-time student with a minimum of 12 credit hrs., and must complete the semester with a 2.0 grade average.

2. A high school graduate or G.E.D. equivalent.

3. Not a recipient of any other federal or state grants of scholarships and demonstrate a financial need.

4. A documented Veteran, or directly related to a Veteran. Eligibility shall be one of the following.

a. A U.S. Veteran or ex-prisoner of war.

b. A current POW/MIA spouse or child.

c. A Veterans Widow (er) who has not remarried.

d. a Veterans child or spouse.

e. VietNow Associate.

f. A Veterans sibling, or any other blood related family.

5. Applicants must submit proof of a Veteran or relationship to a Veteran.

a. A copy of a DD 214 personnel or

b. A copy of a Honorable discharge.

6. Selection will be made by the Freeport Chapter Vietnow Scholarship Committee.

7. Completed applications must be submitted by:-----

\*\* Veterans Name \_\_\_\_\_

\*\*Veterans branch of service \_\_\_\_\_

\*\*Veterans relationship \_\_\_\_\_

I do hereby agree to reimburse Freeport Chptr. VietNow if I drop course (s) after the initial grace period at he start of the semester or withdraw from course(s) at the end of the semester. I also agree to attend a meeting of the Freeport Chptr. VietNow and be available to answer questions concerning my educational goals.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Freeport Chapter VietNow Scholarship Application

1. Application is to be completed by applicant.
2. Please type or print clearly.
3. Attach the following to completed application:
  - a. Three (3) Character reference letters.
  - b. Transcript of courses completed.
  - c. A bibliography statement about yourself, including relationship to veteran a Relationship to same (all information shall remain confidential.)
  - d. Documentation of relationship to Veteran (see#4. And#5 on cover sheet.)
4. Send completed application with attachments to.

*Freeport Chapter VietNow*

*P.O. Box 323*

*Freeport, Il. 61032-0323*

*Applicant's Name* \_\_\_\_\_

*Permanent Address* \_\_\_\_\_

*City, State, Zip* \_\_\_\_\_ *Phone #* \_\_\_\_\_

*Age* \_\_\_\_\_ *Marital status* \_\_\_\_\_ *Number of dependants* \_\_\_\_\_

*Social Security #* \_\_\_\_\_ *Are you currently employed* Yes \_\_\_ No \_\_\_

*Name of current or last employer (if any)* \_\_\_\_\_

*Position* \_\_\_\_\_ *Salary /Wages \$* \_\_\_\_\_

*Fathers employer* \_\_\_\_\_

*Mothers* \_\_\_\_\_ *employer*

**Source and amount of funds available for year in which scholarship is requested:**

*Parents* \$ \_\_\_\_\_ *Own home* \$ \_\_\_\_\_

*Scholarship* \$ \_\_\_\_\_ *Other (spouse)* \$ \_\_\_\_\_

*Savings* \$ \_\_\_\_\_ *( Relative, etc)* \$ \_\_\_\_\_

**Will you be receiving any other scholarships or school loans? Please list:**

### Freeport Chapter VietNow Scholarship Application

Have you previously received assistants from Freeport Chapter VietNow ? Yes \_\_\_ No \_\_\_

Year \_\_\_\_\_ Amount received \$ \_\_\_\_\_

If you do not receive this scholarship, how will you finance your educational ?

Name \_\_\_\_\_ of \_\_\_\_\_ parent, \_\_\_\_\_ guardian \_\_\_\_\_ or spouse \_\_\_\_\_

Relationship \_\_\_\_\_  
—

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Educational Institution you are now attending: \_\_\_\_\_

City, State \_\_\_\_\_

Major/type of training \_\_\_\_\_ Grade point average \_\_\_\_\_

Academic Classification (check one)

\_\_\_ High School

\_\_\_ College Senior

\_\_\_ College Freshman

\_\_\_ Graduate Student

\_\_\_ College Sophomore

\_\_\_ Other (specify)

\_\_\_ College Junior

Educational Institution in which enrollment is desired:

Institutions Name \_\_\_\_\_

City, State \_\_\_\_\_

Course of study \_\_\_\_\_

Degree sought \_\_\_\_\_ Expected date of completion \_\_\_\_\_

Amount of tuition/fees for semester \$ \_\_\_\_\_ Date payment must be made \_\_\_\_\_

\*\*Please write a short essay (100-150 words) on what PATRIOTISM means to you. You may use back of this form or a separate sheet.