

# NORTH DAKOTA

## NATIONAL GUARD ENLISTED ASSOCIATION SCHOLARSHIP APPLICATION

*Must be submitted not later than 1 December of each year*

Name: Last-\_\_\_\_\_ First-\_\_\_\_\_ M.I. \_\_\_\_\_

Home Address: \_\_\_\_\_ City-\_\_\_\_\_ State-\_\_\_\_\_ Zip-\_\_\_\_\_

Telephone: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: M\_\_\_F\_\_\_ Single\_\_\_ Married\_\_\_

Current EA Membership Card Expiration Date: \_\_\_\_\_

Name, Rank, Address, Telephone Number of Unit of Assignment of EA Member:

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Number of Brothers and/or Sisters and their ages (if living at home):

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Have you received any other scholarship(s)? Yes ( ) No ( )

If so, specify scholarship(s) and amount: \_\_\_\_\_

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List activities in which you have participated: (School/Church/Community): \_\_\_\_\_

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List office(s) to which you have been elected in ANY organization: \_\_\_\_\_

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List honors: (School/Athletic/Citizenship, etc.) which you have been awarded: \_\_\_\_\_

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List name and address of University, College, Trade/Business school you plan to attend:

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School's Required Pay Plan: Quarterly ( ) Semester ( ) Annual ( )

Date Payment Due: \_\_\_\_\_

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

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## NATIONAL GUARD ENLISTED ASSOCIATION

### SCHOLARSHIP APPLICATION

(continued)

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

If granted a scholarship and I fail to complete the school term for reasons other than sickness or physical injury, I agree to return any scholarship money received by me to the North Dakota National Guard Enlisted Association.

I further state that I consent to providing the information requested in this application. I have provided this information freely and voluntarily and hereby waive any objections to providing this information which might be made pursuant to the Privacy Act, 5 U.S.C., Section 552a. The North Dakota National Guard Enlisted Association has my permission to use the information given in considering and processing this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

#### The following persons are eligible:

**1. \*INITIAL HERE \_\_\_\_\_ IF YOU ARE: an enlisted member of the North Dakota National Guard and NDNGEA.**

\*Enlisted NDNGEA member applicants must have at least one (1) year remaining on his/her enlistment following completion of the school year for which application is submitted, or have served 20 or more years in service.

**2. \*\*INITIAL HERE \_\_\_\_\_ IF YOU ARE: a dependent, unmarried son, daughter or grandchild of an enlisted NDNGEA member or spouse of an enlisted NDNGEA member. Unmarried spouse or unmarried dependent son, daughter or grandchild of a deceased enlisted NDNGEA member who was in good standing at the time of their death.**

\*\*Enlisted NDNGEA member (parent, guardian or grandparents of unmarried sons and daughters who are applicants, and members whose spouse is an applicant) must have at least one (1) year remaining on his/her enlistment following completion of the school year for which application is submitted, or have served 20 or more years in service.

Scholarships will be awarded in the amount of \$1000.00 for the current school year of applications, and applicants must be enrolled as full-time students at a college, university, trade or business school. Graduate students are not eligible for scholarships.

Awards will be sent directly to the recipient's school of choice, in the student's name.

There shall be no consideration whatsoever given because of friendship, rank or grade of applicant. Awards will be made on the basis of scholarship, character, leadership and need.

#### **All applications must be accompanied by:**

1. A transcript of high school credits and a transcript of college credits for applicants already in an institute of higher learning.
2. A letter from applicant with personal, specific facts as to why the applicants desire to continue his/her education and why financial assistance is needed.
3. Three (3) letters of recommendation verifying this application and giving general moral and personal traits (these may be from community leaders, ministers, educators, etc.)
4. One letter of academic reference, (Principal, Dean or Counselor).

Complete and Mail to: MSG Joe Lovelace  
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