

## 2018 SCHOLARSHIP APPLICATION

The Cumming Chapter of the Vietnam Veterans of America will award \$1,000 scholarships to 2 deserving, college-bound Forsyth County Public or Private High School seniors.

To be eligible, high school candidates must be US citizens and the children, grandchildren or great grandchildren of US Military veterans.

Each candidate must complete the application form and a guidance counselor or principal must sign and attest to the student's grade point average, class rank and SAT or ACT scores.

The Chapter Scholarship Committee will base its selection on the following criteria:

- 1. Scholastic Excellence
- 2. School and Community involvement
- 3. Financial Need

In addition, each applicant must submit a minimum 500 word original essay answering the question why "Freedom isn't Free."

Potential scholarship recipients must be accepted as a full-time student at an accredited 2 or 4 year post-secondary institution.

Each scholarship will be presented in the name of Chapter 1030 of the Vietnam Veterans of America and each will be awarded in honor of the memory of a Vietnam War Combatant who was killed in action or is missing in action.

Applications must be postmarked no later than April 15, 2018 and sent to:

Martin Farrell 2715 Saddlebrook Glen Dr. Cumming, GA 30041

If applications are unavailable at guidance office contact the VVA at 770 500-7234

The VVA Scholarship Committee's selections will be final

APPLICANT NAME:	
	D.O.B:
EMAIL ADDRESS:	***************************************
PARENT/GUARDIAN NAME	TEL. NBR
NAME OF MILITARY VETERAN P GRANDPARENT: (FORM DD-214 WILL BE REQUIRED OF INDIVIDUALS	PARENT/GRANDPARENT/GREAT- S SELECTED FOR SCHOLARSHIP AWARD.)
NAME OF HIGH SCHOOL:	
GRADE POINT AVERAGE:	CLASS RANKING
SAT/ACT SCORE	
SCHOOL ACTIVITIES:	
COMMUNITY ACTIVITIES: (You may attach supporting documen	tation to explain school/community activities)
NAME OF COLLEGE/UNIVERSITY	Y YOU WILL ATTEND:
WHAT MAJOR DO YOU INTEND T	TO PURSUE:
NAME OF GUIDANCE COUNSELO FOR THIS SCHOLARSHIP:	PR/PRINCIPAL RECOMMENDING YOU
GUIDANCE COUNSELOR/PRINCII	PAL SIGNATURE/DATE:
XSTUDENT SIGNATURE/DATE:	
X	
**REMEMBER TO INCLUDE ESSA	