#### **General Information/Criteria:**

- 1. This application is available for any and all command-sponsored, dependent, graduating high school students who are eligible as outlined below. Said student is, or will be, enrolled in a course or program at an accredited college, university, or technical school.
- 2. The applicant is responsible for gathering and submitting all necessary information and official documents. Applications are evaluated on the information supplied; therefore, answer all questions completely. Give specific dates when required.
- 3. This scholarship is made possible through the Community Outreach Funds of the Saber Community Spouses Club (SCSC). SCSC Scholarship Committee members and their dependents are not eligible to apply for the scholarship.
- 4. The SCSC Scholarship Committee reviews and determines applicant eligibility criteria.
- 5. The SCSC Scholarship Committee determines the number of scholarships to be awarded and the monetary value of each based on available funds, the number of applicants, and the analysis of scores. Submission of application does not guarantee a scholarship.
- 6. Awards are granted without regard to race, gender, ethnicity, religion or disability; awards are merit based
- 7. Be sure to take your SAT/ACT test if you have not already done so. Results usually take 4-6 weeks.
- 8. Applicants will be notified, in writing or by phone, of the results.

#### **Eligibility:** Each applicant must meet all of the following requirements:

- 1. The applicant must be a command-sponsored dependent graduating senior from Spangdahlem High School, host nation high school, GSU/MUNSS high school, or an approved home school.
- 2. The applicant's sponsor must be a U.S. military or DoD civilian employee working, or assigned to, the 52nd Fighter Wing unit, GSU, or tenant unit.
- 3. The applicant must have at least a 2.5 cumulative high school grade point average (GPA).
- 4. The SCSC Scholarship Committee reserves the right to reject any applicant who has a prior history of disciplinary problems or conduct.

#### **Limitations:**

- 1. Scholarship funds awarded are to be used for tuition, course related fees, and books at an accredited college, university, or technical school. **Funds may not be used for housing, room, or board**.
- 2. Payment of scholarship awards will be made **directly to the recipient's school**. The recipient must provide the Guidance Counselor with the name and address of the school the recipient will attend. If this information (or deferment notification) is not received by 31 May 2021, the award will be considered unclaimed and will be rolled back into the SCSC Fund.
- 3. Acceptance of an appointment to a service academy or a full tuition four-year scholarship, either before or after selection as a recipient of a SCSC scholarship, will automatically terminate consideration for an entitlement to a SCSC scholarship.
- 4. In the event of a withdrawal from a course or school, the full amount of the scholarship is required to be returned to the SCSC. Funds will not be rolled over to another school. In the event of a withdrawal, the recipient should contact the SCSC Scholarship Committee immediately.

#### **Application Completion:**

- 1. **All parts of the application need to be completed,** using available space on this form *or, if needed you may insert additional pages* properly titled with your Student ID number assigned by the counselor placed in the upper right corner.
- 2. This application becomes complete and valid only when all pages listed below are delivered. All material must be submitted at the same time. Submit only the pages indicated below:
  - The first page of the application, which includes personal data. (page 3)
  - High School & Extracurricular Activities (page 4)
  - Awards & Volunteer Data (page 5)
  - Leadership/Employment Data (page 6)
  - Educational Plans (page 7)
  - Verification Data (page 8)
  - Certification Letter (page 9)
  - Personal Essay (page 10)

#### **Application Submission:**

- 1. Applications must be completed, signed, and emailed to <a href="mailto:scholarships.sabercsc@gmail.com">scholarships.sabercsc@gmail.com</a> no later than 1500, Friday, 30 April 2021.
- **2.** All applications become property of the SCSC Committee. The Committee is not responsible for undelivered applications.

#### **Privacy Act Statement:**

Authority: 10 U.S.C., Chapter 40; 37 U.S.C., Chapter 9; EO 9397, November 1943
Principle Purposes: To facilitate award of the scholarship funds to education centers.
Routine Uses: Information may be disclosed to Federal, state, and local education institutions for the purpose of allocating awards to scholarship recipient accounts; as well as the Saber Community Spouses Club Scholarship Committee and subcommittees for accounting purposes.

# Personal Data Please type or print clearly.

NAME (last, first, m.i.)	Contact Phone Number
Father/Guardian Name	Mother/Guardian Name
Father/Guardian Email	Mother/Guardian Email
Father/Guardian Phone Number	Mother/Guardian Phone Number
Current Mailing Address (APO)	
Sponsor's Name	Rank/Grade & Branch of Service
Sponsor's Organization	Duty Phone Number
Sponsor's Organizational Address	 DEROS

Student ID#:	
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# High School and Extracurricular Activities Please type or print clearly

#### HIGH SCHOOL AND EXTRACURRICULAR ACTIVITIES

List the school organizations and non-school sponsored organizations in which you participated. (i.e. organized sports, debate teams, drama club, school publications, church, AYA, community organizations, etc.). Be sure to note any offices held, either elected or appointed.

organizations, etc.). De sure to note any offices field, ethicl elected of appointed.	
Freshman Year:	
Sophomore Year:	
Junior Year:	
Senior Year:	

#### Awards & Volunteer Data Please type or print clearly

AWARDS/HONORS List all distinctions or honors earned through academic and cinduction, science fair award, Eagle Scout, awards for culturation.	•	
Award/Honor		Grade (9,10,11,12)
COMMUNITY CONTRIBUTIONS/VOLUNTEER WOI List your volunteer work. Include length of service, approxing volunteered each week and grade level when you did the vol- organization which benefited from your volunteerism, so we	nate number of unteer work. Pl can verify you	ease indicate the r community service.
Volunteer Position or Description of Volunteer Work	Hrs. per V	Veek Grade (9,10,11,12)

If necessary, add additional page using the same format

Student ID#:	
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#### Leadership/Employment Data Please type or print clearly

# **LEADERSHIP** List all leadership roles you held in school, extracurricular, volunteer, and job-related activities. Leadership Role Grade (9,10,11,12) **EMPLOYMENT DATA** Employer: \_\_\_\_\_\_ Position Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Work Hours: \_\_\_\_ Briefly describe your duties: Employer: \_\_\_\_\_\_ Position Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Work Hours: \_\_\_\_ Briefly describe your duties:

If necessary, add additional page using the same format

Student ID#:	
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# **Educational Plans Please type or print clearly**

EDUCATION DATA	
Other High Schools Attended (grades 9-12) & Location	Dates attended (month, year)
Future Educational Plans. List the colleges/universities/technapplied. Indicate if you have been accepted.	nical schools to which you have
College/University/Technical School	Accepted/No Notification Yet
<b>Additional Information.</b> Please list anything else you would Committee to know about you.	like the SCSC Scholarship

Student ID#:	
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#### **Verification Data**

Please complete this form and attach the STUDENT'S COMPLETE HIGH SCHOOL TRANSCRIPT. We would also like for you to black out the name of the student on the transcript. Thank you for your help!

DATE:	
GPA:	_
Class Rank: of	-
School student plans to attend:	
SAT TOTAL:	_
ACT Composite:	

Student ID#:	
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#### **Certification Letter**

If I accept the Saber Community Spouses Club (SCSC) Scholarship Committee award, I certify I will abide by the following conditions:

- 1. I understand scholarship funds awarded are to be used for tuition, course related fees, and books at an accredited college, university, or technical school. **Funds may not be used for housing, room, or board**
- 2. I understand payment of scholarship awards will be made **directly to the school I indicate**. I must provide the Guidance Counselor with the name and address of the school I will attend. If this information (or deferment notification) is not received by 31 May 2021, the award will be considered unclaimed and will be rolled back into the SCSC Fund.
- 3. I understand that acceptance of an appointment to a service academy or a full tuition four-year scholarship, either before or after selection as a recipient of a SCSC scholarship, will automatically terminate consideration for an entitlement to a SCSC scholarship.
- 4. In the event of a withdrawal from a course or school, the full amount of the scholarship is required to be returned to the SCSC. Funds will not be rolled over to another school. In the event of a withdrawal, I understand that I should contact the SCSC Scholarship Committee immediately.
- 5. I am a responsible citizen in good standing in the school and community.

ADDITIONALIZATION DELIZIONE NAME

- 6. It is my responsibility to notify the SCSC of any changes of status (e.g. change of schools, change of address, deferment, etc.). Failure to do so may result in forfeiture of my scholarship award.
- 7. If any of the above conditions are violated, scholarship funds must be returned to the SCSC.

I agree that my signature on this form will authorize the SCSC Scholarship Chair to release this application and supporting documents to the Scholarship Committee as needed. In addition, I agree to be present for the scholarship to be presented at a SCSC function, and my name and/or photograph may be printed in community publications and publicity channels as an award winner.

Finally, I certify that all information in this application is accurate to the best of my knowledge.

APPLICANT'S PRINTED NAME _	
SIGNATURE	DATE
SPONSOR'S PRINTED NAME	
SIGNATURE	DATE

Student ID#:	
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# Personal Essay For Graduating Seniors 2021

**Directions:** Type your Student ID Number assigned by your counselor in the top right-hand corner of the first page. Number each page of your essay. *Use Times New Roman, 12-point font, and double-space your response. Your response must be no longer than 2 pages*.

You have one prompt from which to develop your essay response. Please be clear, concise, and answer to the best of your ability. Take into consideration all the rules of composition writing (e.g., flow and structure), as well as the rules of the English language. Please read the prompt carefully, and make sure you answer each part of the prompt and provide a relevant and nuanced explanation. You will be graded on how well you explain your answer and support your opinion. The committee will use a rubric to grade the essay.

#### **ESSAY PROMPT:**

Being a DoD dependent introduces young people to a variety of backgrounds, cultures, and unique experiences that shape how they view both themselves, and the world, in meaningful ways. Share in what ways *your* experience as a DoD dependent has impacted your life and how you think that knowledge and understanding will play a part as you pursue your next educational step.