



## DISABLED AMERICAN VETERANS AUXILIARY EDUCATION SCHOLARSHIP APPLICATION



### 1. GENERAL INFORMATION:

Name of Applicant: \_\_\_\_\_  
Last First Middle

Permanent Address: \_\_\_\_\_  
Number & Street

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
(Area Code) Phone Number

\_\_\_\_\_  
Email Address

Date of Birth: \_\_\_\_\_

Complete name and address of the school you will be attending:

\_\_\_\_\_  
\_\_\_\_\_

School phone number: \_\_\_\_\_

Year of Education: Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate ☐

Full-Time Student ☐  
(Minimum of 12 credits)

Part-Time Student ☐  
(Minimum of 6 Credits)

Unique Request Student ☐  
(Less than 6 credits)

Date you plan to attend school: \_\_\_\_\_ Number of years you plan to attend: \_\_\_\_\_

Proposed major & profession: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

### 2. UNIQUE REQUEST ONLY (less than 6 credits):

Briefly explain your unique request. (Why you will need to take fewer than 6 credits)

\_\_\_\_\_  
\_\_\_\_\_

### 3. CAREER/LIFE ASPIRATIONS

Explain your career/life aspirations and how your education will help achieve these goals.  
Attach a separate sheet, 500 words maximum.

#### 4. LIST OF SERVICES TO DISABLED VETERANS/FAMILIES

On a separate sheet, provide a chronological list (not a summary) of what you have done to serve disabled veterans or their families during the past two years.

Submit any additional information that might affect your application for a scholarship.

I hereby affirm the correctness of the information submitted.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Parent/Guardian Signature (if student is under 18)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

#### Submission Checklist:

- ☐ Completed Application (must be the most recent application Rev. Sept. 2023).
- ☐ Career/life aspirations.
- ☐ List what you have done to serve disabled veterans/families during the past two years.
- ☐ Copy of official transcript of grades.
- ☐ **School's W-9** (can be obtained from the financial aid/bursar office).

This application must be completed, signed and postmarked NO LATER THAN MARCH 22, 2024, and sent to the National Disabled American Veterans Auxiliary Headquarters at the address below.

National Education Scholarship Fund  
Disabled American Veterans Auxiliary  
860 Dolwick Dr.  
Erlanger, KY 41018