



VA-ACME SCHOLARSHIP APPLICATION CHECKLIST * 2011 *

www.va-acme.org

Please check the boxes to ensure your scholarship application package is complete. Incomplete packages will not be considered. All materials sent to the VA-ACME (Virginia Advisory Council on Military Education) Scholarship program become the property of VA-ACME and will not be returned. Packages or related documents that are not postmarked by **17 January 2011** will not be considered. Members of the VA-ACME Board and their families are not eligible for any of these awards. The decisions of the VA-ACME Scholarship Panel are final.

- VA-ACME Scholarship Application Cover Sheet 2011**
- Official Transcripts**
- ONE Letter of Recommendation (Commanding Officer, Supervisor, or Instructor/Professor) from a person unrelated to you, who can attest to your motivation, character, and integrity.**
- Evidence of Enrollment (For example—Letter of Acceptance)**
- Essay (Each scholarship has a different topic: please ensure you respond to the correct one. The essay must be typed, double-spaced, size 12 font; not to exceed two pages.)**

Mail complete application packages to:

**VA-ACME Scholarship
P.O. Box 15292
Norfolk, VA 23511**

Note: Only the winners will be required to provide proof of military status. The proof will be one of the following: Leave and Earning Statement (LES), Military ID Card, or DD-214. Please block out the Social Security Number. Permanently disabled service members will need to provide proof of disability from the Department of Veterans Affairs, and for service member missing/killed in action, the Family Member will need to provide a Report of Casualty DD Form 1300.



VA-ACME SCHOLARSHIP APPLICATION COVER SHEET

*** 2011 ***

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Please check the scholarship you are applying for:

- Active Duty, Drilling Reservist, or National Guard Member**
- Family Member (to include Spouse or Child) of Active Duty, Reservist, or National Guard Member**
- Permanently Disabled Military Member, Family Member of Permanently Disabled Military Member, or Family Member of Service Member Missing/Killed in Action**
- Veteran or Retiree of the Armed Forces working or residing in Virginia.**

Note: Please prepare separate packages if you qualify for more than one category.

Applicant Information

Full Name: _____

Mailing Address: _____

Home Phone: _____ **Cell Phone:** _____

E-Mail Address: _____

College/University: _____

Select Level of Education you are Pursuing: Associate Baccalaureate Graduate

Title of Degree you are Pursuing: _____

Approximate number of credits to complete Degree Program: _____ **GPA:** _____

List Degrees Already Earned: _____

Duty Station/Address of Military Member: _____

Branch of Service: _____