

**Military Officers Association of America (MOAA)
Michigan Capitol Area Chapter College Scholarship Program**

Application for Scholarship or Book Allowance

Name of Applicant _____ Date _____

Home Address _____

City _____ State _____ Zip _____

Telephone (Home) _____ (Cell) _____

_____ I am a child/grandchild of _____,
who is a current member of the Capitol Area Chapter of MOAA.

_____ I am a child of _____, who entered
the U. S. Armed Forces from Michigan and died or was disabled in the line of duty.

_____ I am a disabled military service member whose home of record is Michigan.

FOR BOOK ALLOWANCE ONLY. Complete 1 and 2. Sign and date the application.

1. Attach evidence of acceptance/enrollment to an institution of higher learning (HS only).
2. Provide a copy of your academic transcript: _____

FOR SCHOLARSHIP AWARD. Complete 1 – 8 below and submit as separate enclosures. Sign and date the application. Note: College freshmen may include high school information for numbers 6, 7 and 8.

1. Provide on a separate page evidence of acceptance/enrollment to an institution of higher learning. (HS only)
2. Provide a copy of your academic transcript to include cumulative GPA.
3. Provide an essay of up to 200 words explaining your career goals.
4. Provide a brief explanation of financial need.
5. Attach Page 2, Rating of Personal Qualifications, signed by counselor/advisor or teacher.
6. List on a separate page your school and community extra-curricular activities.
7. List on a separate page your honors and awards, including any ROTC or military training.
8. List on a separate page your work experience.

I certify the above information supplied by me on this application is, to the best of my knowledge, true and accurate.

Signature _____ Date _____

**Completed applications must be submitted not later than March 15 of the award year to:
Maj DeLee M. Dankenbring, 992 Pennine Ridge Way, Grand Ledge, MI 48837-9809**

