

**Missouri National Guard  
Association Auxiliary  
2018 Scholarship Rules**

**Eligibility:** MoNGA Auxiliary members, their spouse, their unmarried dependent sons and daughters.

Applicants must plan to be enrolled as full-time students at a university, college, business or trade school.

Eligibility is limited to undergraduates.

**Enclosures:** Include the following with the application:

1. Verification of membership in the MoNGA Auxiliary: A copy of the current and immediate past year membership card or a letter of good standing showing paid membership for this current year and the previous year from the Auxiliary President or Financial Secretary.
2. A transcript of high school credits and/or college credits for applicants already enrolled in institutions of higher learning.
3. A letter from applicant stating specific goals to continue his/her education.
4. Two (2) letters of recommendation providing information of applicant's good character and/or leadership abilities. School officials, ministers, employers or volunteer groups with whom the applicant is affiliated may provide these letters.

**Amount of Scholarship:** One (1) \$500.00 scholarship and one (1) \$250.00 will be awarded for a full-time student.

**Award Receipt:** A check in the amount of the award will be sent to the recipient, made payable to the institution of the recipient's choice, once verification of current enrollment has been received.

**Notification:** Recipients will be notified personally by the Scholarship Chairman or the MoNGA Auxiliary President and an announcement made by July 1, 2018 to the Auxiliary membership.

**Application Deadline:** Applications are due no later than midnight **May 31, 2018**.

**Mail completed application to: MoNGA Auxiliary Scholarship, Jill Blaylock, 4638 Hickory Ridge View Ct. Eureka, MO 63025 OR email all necessary items to [jillblaylock@live.ocr](mailto:jillblaylock@live.ocr)  
Please include scholarship applicants name on each page submitted.**

All blanks must be completed or marked not applicable (N/A). Attach additional pages if necessary to adequately complete this application. Incomplete applications will not be considered.

**Missouri National Guard  
Association Auxiliary  
Scholarship Application  
2018**

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip

Telephone: (\_\_\_\_) \_\_\_\_\_ Birth Date: \_\_\_\_\_

Male or Female: \_\_\_\_\_ Single or /Married: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Name, rank, address, phone and Unit of parent, spouse or sponsor who is a National Guard Member:

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

Auxiliary Member Name and Relationship to Guard Member: \_\_\_\_\_

Current Status of Applicant (check one):

High School \_\_\_\_ College \_\_\_\_ Business/Trade \_\_\_\_ Working \_\_\_\_

If currently enrolled in school or college, fill in the following information:

Name and address of school or college and grade or term: \_\_\_\_\_

\_\_\_\_\_

Enrolled for: (Example: Fall 2018) \_\_\_\_\_

Number of brothers and sisters and their ages (if living at home): \_\_\_\_\_

Fill in the following information if applicable:

Spouse's occupation: \_\_\_\_\_

Applicant's occupation: \_\_\_\_\_

**For the following questions, attach a separate sheet if necessary.**

List name and address of college, university, trade or business school that you plan to attend:

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Activities that you have participated in (school, church, community): \_\_\_\_\_

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Offices that you have been elected to for an organization: \_\_\_\_\_

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Honors that you have been awarded (school, athletic, citizenship, etc.): \_\_\_\_\_

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What career are you planning to pursue and why? \_\_\_\_\_

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While attending college, will you work part-time? \_\_\_\_\_ or during the summer? \_\_\_\_\_

Will you be attending school full-time in the Fall of 2018? \_\_\_\_\_

I have answered the above questions to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Spouse

\_\_\_\_\_  
Date

If I am granted a scholarship and I fail to complete the school term for reasons other than sickness or physical injury, I agree to return any scholarship money I receive to the Missouri National Guard Auxiliary.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date