



Association of the United States Army
Major Samuel Woodfill Chapter
Serving the Tri-State Area of Indiana, Kentucky and Ohio
www.ausatristate.org

AUSA 2020 Scholarship Application Packet

Instructions

Three priority categories of applicants:

- 1. Children and Spouses of U.S. Army Soldiers* who are currently serving or have served in the Global War on Terrorism (in that order).**
- 2. Army Soldiers and Army Veterans who have served or who are currently serving in Global War on Terrorism.**
- 3. Family Members** of AUSA Members who belong to the Major Samuel Woodfill Chapter.**

***U.S. Army Soldiers – Active, National Guard, and Reserve**

****Family Members – Children, Grandchildren, and Spouses**

Priority given to residents of Southeast Indiana, Northern Kentucky, and Southwest Ohio.

Previous recipients of the Scholarship may not reapply.

Applicants may already attend college or have been accepted at an accredited college or university. Each one-time scholarship is set at \$1000 and will be applied directly to the applicant's tuition, room or board at his or her college or university.

1. Confirm eligibility.
2. Begin the application process **EARLY** to minimize possibility of submitting an incorrect/incomplete package and/or missing the submission deadline.
3. Write neatly or type all required information on appropriate applicant information forms, including sponsor information. Write applicant's complete name at the very top of **ALL** pages submitted. Only neat, legible completed application packages will be accepted for consideration.
4. Forms in Application Packet, all of which may be downloaded via Major Samuel Woodfill Cincinnati Chapter Webpage at <http://www.ausatristate.org/scholarship>
 - a. **Counselor's Data Sheet** (for High School Seniors only) – to be completed by applicant's High School Counselor, with attached valid high school transcript.
 - b. **Personal/Teacher/Professor/Professional Recommendation Form** (required for ALL applicants) to be completed by recommender.
 - c. **Applicant Information**
 - d. **Medically/Honorably Discharged Veterans** will submit a copy of DD Form 214 with blocked SSNs.
 - e. **U. S. Army Soldiers (parent or applicant)** will submit a copy of GWOT orders or award certificates with blocked SSNs.

5. Recommendation forms for applicants must come from someone OTHER THAN a relative of the applicant.
6. **All High School Senior applicants** must also submit an Activities Sheet with the following information listed:
 - a. High School activities and offices held
 - b. High School honors and awards
7. **All Scholarship applicants** must submit the following:

An original essay, typed/printed, double-spaced and not longer than 500 words answering the following question: **"What is the greatest challenge you have faced and how has it impacted you?"**
8. A scholarship may be revoked for any of the following reasons:
 - a. Recipient fails to attend college or university.
 - b. Recipient receives a criminal conviction.
 - c. Recipient's GPA falls below application requirements.
 - d. Recipient fails to meet eligibility criteria.
9. Scholarship designees/recipients who accept an appointment to any service academy, four-year ROTC scholarship, or any other four-year full scholarship are ineligible to receive an AUSA Scholarship. For three-year ROTC appointments scholarships will be applied to first year.
10. All scholarship applications (with attachments) must be submitted by mail and must be postmarked no later than **April 1, 2020**. Late applications will not be considered. We recommend you keep a copy of your completed application for your records. Selected recipients will be announced during a general meeting of the chapter in late spring of 2020.
11. All applicants must submit a copy of college or university acceptance letter or transcript.
12. Send all application packets to and if you have any questions please contact:

LTC Robert F. Sprague, Retired
1326 Cayton Road
Florence, KY 41042-9335
Phone: 859-525-1082
Email: spraguer@fuse.net

Judging Process

The chapter Scholarship Committee will make final selections. Candidate impartiality will be preserved during the selection process. The decisions of the Scholarship Committee are final. Individual scores will not be discussed with the applicants (or any other individual). Winners will be notified by e-mail or mail of their selection. Members of the Scholarship Committee and their immediate family members are ineligible for an AUSA Scholarship.

Evaluation/Selection Criteria

For Graduating Senior Applicants:

- GPA (Unweighted), curriculum assessment
- Extracurricular activities, honors, and/or awards
- Recommendation forms/attachments
- Essay
- SAT, ACT scores (in event of a tie after evaluation of above criteria)

Applicant's Name (Last, First, Middle) _____

Counselor's Data Sheet (graduating seniors only)

Note: Applicant's counselor or other duly authorized representative of the high school **MUST** complete this form. Please return completed form to applicant in **sealed** envelope, **signed by you** over the sealed portion of the back of the envelope, for inclusion in application package.

Sat Scores: Verbal_____ Math_____

Act Score_____

Year of Graduation_____

Size of Graduating Class_____

Class Rank_____

Percentile Rank_____

Unweighted Cumulative Grade Point Average (For Most Recent **Seven Semesters** On A **4.0 Scale**) _____

Valid High School Transcript must be submitted by April 1st.

Information about person completing form:

Printed Name

Signature

Office Phone

Position/Title

Email Address

Applicant's Name (Last, First, Middle) _____

**Personal/Teacher/College Professor/Professional
Recommendation Form (for all applicants)**

(Note: This form **MUST** be completed by applicant's high school teacher, college professor, or a professional in the applicant's field of study. ***All applicants require a personal recommendation.***)

Instructions:

1. Please ensure completed form and attached narrative are neat and legible.
2. All information is confidential.
3. Please attach comments/examples in a brief narrative—1 page or less--that you believe would help the judging committee to evaluate the applicant.
4. Please return completed form to applicant in **sealed** envelope, **signed by you** over the sealed portion of the back of the envelope, for inclusion in application package.
5. Thank you for your time and effort.

How long have you known the applicant? _____

In what capacity do you know him/her? _____

What are the qualities in this applicant that would assure his/her academic success?

Continue on separate sheet

Evaluate the applicant on a scale of 1 To 5 with 5 highest and 1 lowest in The Following areas:

Dependability _____

Ability to Get Along with Others _____

Maturity _____

Leadership Ability/Potential _____

Initiative _____

Information about person completing recommendation (must not be related to applicant):

Printed name

Daytime telephone number

Signature

Title or occupation

Initial Here ____ I am not a relative of the applicant.

1 Attach (Narrative)

Applicant Information

Last Name First Middle Date of Birth

Check one:

Children and Spouses of U.S. Army Soldier Army Soldiers and Army Veterans Family Members of AUSA Member who belong to the Major Samuel Woodfill Chapter. AUSA Member's Name & Number:

(_____) _____
Phone Number Email Address (**Please Print**)

Street Address City State Zip

Date of graduation & name of high school (high school seniors only)

Address of High School

Or Returning College Student:

(Name of college or university)

(Address) _____

My GPA is _____ **(attach grade report)** **My major is** _____

What year (senior etc.) _____ **My extra curricula activities include** _____

(if necessary, attach separate sheet with you're your name)

Army Qualifying information:

Name _____ **RANK** _____
of Army Veteran, Army Parent of applicant, Fallen Soldier (for children or spouse) or GWOT soldier

Army Status (check one and submit documentation for authentication):

Active Retired Active/Wounded On Disability Deceased

Army Component (check one):

Active Army
 Army National Guard - _____
 Army Reserve _____ state

Army Years of Service From _____ **To** _____

Attachments: *Supporting military documents, high school transcripts and college acceptance letters (for High School Seniors Only) and college transcripts for current college students.*