



APPLICATION FOR AUSN SCHOLARSHIP

AUSN SPONSOR INFORMATION

MEMBER # _____ **Title/ Rank:** _____

NAME: _____ / _____ / _____
Last First M.I.

RELATIONSHIP: _____ (Mother/Father/Guardian/Self-Sponsor)

PHONE: _____ / _____
Residence Business

E-MAIL: _____

APPLICANT'S INFORMATION

APPLICANT'S NAME: _____ / _____ / _____
Last First M.I.

ADDRESS: _____
Street
_____ / _____ / _____
City State Zip

PHONE: _____ / _____
Residence Business

E-MAIL: _____

STUDENT ID # _____ **GPA:** _____ **BIRTHDATE:** _____
Month/ Day/Year

COLLEGE/TECHNICAL INSTITUTION NAME: _____

ADDRESS: _____
Street
_____ / _____ / _____
City State Zip

College Status: Freshman _____ Sophomore _____ Junior _____ Senior _____

Have you previously applied for AUSN Scholarship: Yes _____ No _____

If yes; please state Year(s): _____

Field of Study: Major: _____ Minor: _____

Expected Graduation Date: _____



Estimated Costs for School Year: Enter estimated college costs and expected fund source:

Tuition and fees: \$ _____
Books and supplies: \$ _____
Room/Board: \$ _____
Transportation: \$ _____
Personal: \$ _____
Other costs (explain) \$ _____
Total estimated costs: \$ _____

Work Experiences: List your volunteer or employment experience:

Please Attach the Following Supporting Documents with this Form:

Photograph: Submit a high resolution photograph of any size.

Transcripts: A copy of your most recent grades from high school, college or technical institution.

Letter of Reference: Letter should be from someone with whom you have a non-social relationship. The letter should be directly enclosed to you with the application.

Autobiography: Submit a one page paper, with your full name and Student ID Number at the top. Tell us a little about yourself and the things that have influenced your life. Please include memberships, accomplishments, hobbies and goals.



STATEMENT BY APPLICANT

I, _____, am applying for a scholarship from the Association of the United States Navy's Scholarship Program. The answers given are complete and correct to the best of my knowledge. I will advise if any changes in my status which would affect my eligibility. If selected, I will honor the following conditions under which the award is given and while in the program:

- Remain a fulltime student in good standing.
- Provide transcripts of work completed.
- Provide at all times a valid address and reply promptly to letters from AUSN relating to the scholarship.

Males Only:

I registered for Selective Service at _____ on _____
Place Date

OR

I will register for Selective Service in _____ when I reach eligible age.
Month/Year

I am submitting the following documents for consideration for the scholarship:

Application
SAT/ACT Scores

Photograph
Letter of Reference

Transcript(s)
Autobiography

I hereby give the Association of the United States Navy (AUSN) the right to use information about me and related personal data for the purpose of including such material in AUSN's publicity soliciting funds for the AUSN Scholarship Program.

Applicant's Signature: _____ **Date:** _____

Parent/Guardian's Signature: _____ **Date:** _____

Sponsor's Signature: _____ **Date:** _____