

**SCHOLARSHIP ELIGIBILITY AND REQUIREMENTS 2018-2019
MILITARY OFFICERS WIVES CLUB TAMPA CHAPTER**

ELIGIBILITY REQUIREMENTS:

1. Be a dependent or grandchild of a member of the MOWC Tampa Chapter who has been in good standing for a minimum period of one year prior to the date of application. **THE DATE THE SPONSOR JOINED THE CHAPTER MUST BE PRINTED ON THE APPLICATION.**
2. Be a graduating senior from a secondary school in 2018-2019.
3. Have a GPA of 3.5 or higher OR documented IEP/504 Status.
4. Complete the Scholarship Application Form.
5. Attend the **Thursday, June 14, 2018**, Luncheon & Awards Ceremony. Attendance is required by the **recipient or immediate family member** in order to receive the scholarship award.

REQUIRED ATTACHMENTS:

1. Submission of proof of Military Affiliation (DD214 or Military ID) of the sponsoring MOWC Tampa Chapter member as the applicant must be a dependent or grandchild of a member of MOWC Tampa Chapter.
2. Submission of proof of 3.5 GPA in the form of the high school transcript or transcript and IEP/504.
3. Submission of two written letters of reference from someone other than a relative. References may be from teachers, school counselor, clergy, and/or work supervisor.
4. An acceptance letter from an accredited college, community college, or university with Student ID number included.
5. A letter written by the student in which he/she explains his/her goals, academic experience, and extracurricular activities.
6. A completed Scholarship Application form (see Application button on the web page).
7. A color photo (head shot) of student's senior picture (or a scanned photo sent via email in jpeg).

Submit completed application package by 1 April 2018 to:

Esther Berg
Scholarship Coordinator, MOWC
9207 Mississippi Run
Brooksville, FL 34613

NO LATE DOCUMENTATION WILL BE ACCEPTED.

**MILITARY OFFICERS WIVES CLUB (MOWC) TAMPA CHAPTER
SCHOLARSHIP APPLICATION 2018-2019**

Date of Application _____

Name/Rank/Service of Sponsor (**Copy of Military ID attached**):

Name: _____

Address: _____

City State Zip: _____

Telephone: _____ Email: _____

Date of Birth: _____ Gender: _____

Graduating School (Name & location): _____

College/University Accepted (Name & location): _____

Student Identification Number (if known): _____

Academic Awards & Honors (name & year received): **Attach additional page(s) as needed.**

School Activities (Clubs, bands, athletics, etc. – name & year): **Attach additional page(s) as needed.**

Other Extracurricular Activities (volunteering, work, etc. name & year): **Attach additional page(s) as needed.**

Community-Related Activities (charity, scouting, religious, etc. – name & year): **Attach additional page(s) as needed.**

Application package must be complete, containing all the information requested above, at the time of submission. An incomplete application package will not be considered for scholarship. The Scholarship Coordinator will not call requesting missing documents.