



NCOA[®]

NCOA/JROTC Scholarship Application

A. Personal Information

1. Name _____
2. Address (Street) _____
3. Address (City, State, Zip) _____
4. Telephone Number _____

B. Educational Information

1. High School _____ JROTC Dates _____
2. Date graduated or will graduate _____
3. Date awarded JROTC Award of Excellence _____
4. College or Trade School planning to attend _____
5. Expected Start Date _____
6. Field of study _____

C. Certification

1. Have you previously applied for this scholarship? Yes or No (If yes, when? _____)
2. I understand, if selected, this is a one-time award and not open for renewal.
3. I understand that only individuals selected to receive scholarships will be notified.

Applicant Signature

Date

Parent or Guardian Signature

Date

D. Recommendation

I recommend _____ for award of the NCOA JROTC Scholarship and certify he/she meets the eligibility criteria.

Instructor Name

School

Signature

Date