American Society of Military Comptrollers
P.O. Box 440234
Jacksonville, FL 32222-0021

January 16, 2019

Subj: Scholarship Award Program

The Greater Jacksonville/Kings Bay Chapter of the American Society of Military Comptrollers (ASMC) is soliciting applications for a $500.00 scholarship award to be given by our chapter/organization. Applicants must be seniors in a local high school, pursuing a college education in the field of Accounting, Finance, Business, or Computer Science.

Applications must be postmarked no later than March 20, 2019, and should be mailed to:

ASMC Greater Jax/Kings Bay Chapter
P.O. Box 440234
Jacksonville, FL 32222-0021

If you have any questions, I can be reached at 904-449-3625 or at joanofops@yahoo.com.

You may make additional copies of the enclosed application, as needed.

Sincerely,

Joan McNeish
Joan McNeish
Scholarship Committee Chair
PART I. PERSONAL INFORMATION:

1. Applicant’s Name:

First
Last

Male / Female
Circle One

2. If you are an ASMC member’s child and/or step-child, please annotate Parent’s Name:

First
Last

3. Applicant’s Address:

Street Address

City  State  Zip Code

4. Telephone Number(s) (INCLUDE AREA CODE) and E-Mail Address:

Home
Cell (Indicate Parents or Applicants)

E-Mail Address (please print clearly) and indicate Parent’s or Applicants
5. Parent's/Guardian's Name: (Please Print)

_________________________________________ or ______________________________________
Mother/Guardian                                      Father/Guardian

6. To the best of my knowledge, the information contained in this application is true and correct.

_________________________________________  Date
Parent/Guardian Signature

_________________________________________  Date
Applicant's Signature

PART II: ACADEMIC INFORMATION

1. Name of High School: __________________________________________

2. Class Rank________ out of ___________  Counselor Verified/Initials

3. Grade Point Average (GPA) __________________

4. SAT scores________ Reading ___________ Math ___________

5. College or University you plan to attend during the next academic year:

________________________________________________________________________
Name                                  City                        State

6. Have you been accepted by the college or university indicated above?

    Yes_______ No _______ Date Accepted ________________________________
7. If you have applied to colleges or universities (other than your first choice listed above), please list below and circle Yes or No if you have received an acceptance letter:

a. ___________________________________________  Acceptance Letter  Yes / No

b. ___________________________________________  Acceptance Letter  Yes / No

c. ___________________________________________  Acceptance Letter  Yes / No

d. ___________________________________________  Acceptance Letter  Yes / No

8. What will be your MAJOR? ________________________________________________

9. What will be your MINOR? ________________________________________________

10. Rank and grade point average verified by:

__________________________________________

School Counselor's Name (Please Print)  Signature

Telephone Number: ___________________________  Date: ______________________

PART IV ATTACHMENTS

1. Autobiography: **(minimum 500 words; double spaced; list your name in top right corner; and annotate "Word Count" after statement)** - Include the following information:
   - Personal history and future goals
   - Involvement in any Leadership Roles: Student Government; Academics (i.e., National Honor Society, Honor Roll, etc.); Club Officer, Eagle Scout, etc.
   - Involvement in any Extra Curricular Activities: Sports or Cheerleading; Part-Time Employment; Church Activities; School Clubs (i.e., Yearbook, Choir, Drama, Language, etc.); Volunteering within your Community
2. High School Transcript.

3. Letter of acceptance from college/university.

4. Copy of college entrance examination score.

5. If you desire, a Letter of Recommendation from a teacher, mentor, etc. can be provided.

For use by ASMC Scholarship Committee:

If applicant is a child or step-child of an ASMC member. ________________________________

Scholarship Committee Score/Rating: ________________________________

Notes:

Scholarship Committee Chair Signature: ________________________________ Date: ________________________________