



Last 4 of Applicant SSN: \_\_\_\_\_

**High School Senior Scholarship Application 2024-2025 Academic Year**

**APPLICATION INSTRUCTIONS**

1. The application can be downloaded via [Edwardsspouses.com/scholarships](http://Edwardsspouses.com/scholarships) please fill out the form and submit via email\* to [scholarshipESC@gmail.com](mailto:scholarshipESC@gmail.com) or print and submit via mail to:  
 ESC Scholarship Committee Chairperson  
 P.O. Box 543  
 Edwards AFB, CA 93523

(\*email is preferred, however, if you are sending via USPS – you must notify the ESC Scholarship committee via email so that the post can be monitored)

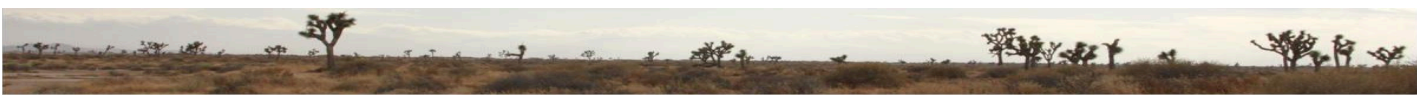
2. Letters of Recommendation must be mailed or emailed **by the author** to the address (or email) provided above.
3. Transcripts can be mailed or emailed to the addresses provided above.
4. The completed application must be submitted by or postmarked by 15 April 2025 to be considered.

\*ESC and the Scholarship Committee is not responsible for notifying applicants if required documents have/have not arrived. Applicants may request this information.

APPLICANT'S INFORMATION	
Name (Last, First, Middle):	
Social Security Number (SSN):	
Current Mailing Address:	Name of Institution Currently Attending:
Phone Number:	Personal Email Address:

SPONSOR'S INFORMATION	
Sponsor's Name (Last, First, Middle):	
Organization:	
Phone Number:	Duty Phone Number:

ELIGIBILITY CATEGORY (Select one)					
<input type="checkbox"/>	Active Duty	<input type="checkbox"/>	Reserve	<input type="checkbox"/>	Civil Service (DOD)
<input type="checkbox"/>	Retired	<input type="checkbox"/>	Federal Guard	<input type="checkbox"/>	Deceased Active Duty



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**FUTURE EDUCATION INFORMATION**

Please list the school or program you plan to attend. If you do not know, please list those you have applied to:

- 1.
- 2.
- 3.

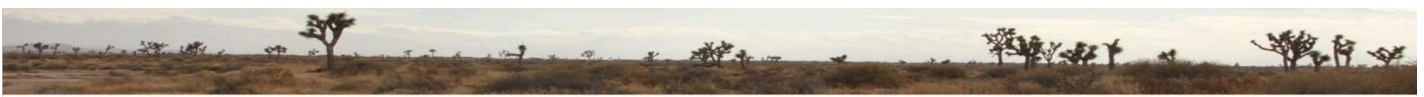
If you are planning to attend a nontraditional college, or a training program please answer the following question. Please mark "N/A" if this does not apply to you.

Training Program Name:	
Anticipated Length of the full program:	
Anticipated cost of the ENTIRE program:	
Anticipated cost of the 2023-2024 school year:	

**COMMUNITY/VOLUNTEER SERVICE**

List volunteer work with service, religious and other community organizations of which you were involved during grades 9-12. List most recent first.

Organization (Name, City, State)	Position/Title	Estimated Total Hours	Time Volunteered Mo/Yr. - Mo/Yr.
<b>Estimated total hours:</b>			



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**EXTRACURRICULAR ACTIVITIES**

List any sports, leadership positions, clubs, etc. that you were involved in during grades 9-12.			
Organization (Name, City, State)	Position/Title	Estimated Total Hours	Time Participated Mo/Yr. - To Mo/Yr.
Ex: Desert HS, Edwards, CA	Basketball Manager	40	Oct 2024 - Feb 2025
<b>Estimated total hours:</b>			

*The Edwards Spouses' Club (ESC) is a non-profit, social/welfare private organization and is not part of the DoD or any of its components and has no governmental status.*



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**AWARDS/HONORS**

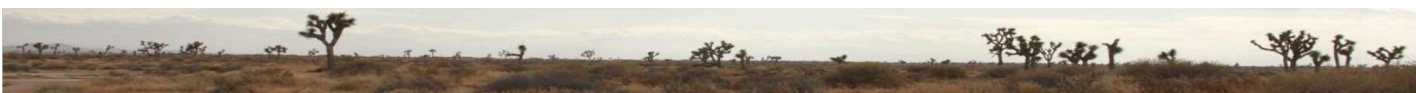
List any recognition you have received during your high school career, this may include honor roll, GPA achievements, etc.

Name of Award/ Organization	Description of Award	Date Received
Ex: Honor Roll	Maintain A/B Grades in all classes	Dec 2024

**EMPLOYMENT DATA**

All information including the hours and dates of employment must be fully completed. List the most recent employment first. Include employment hours through the date the application is submitted.

Job Title & Description	Estimated Total Hours	Dates Employed From Mo/Yr. - To Mo/Yr.
Ex: Commissary Bagger Bagging groceries for patrons at Edwards AFB	120	Aug 2024 – Present
<b>Estimated Total Hours:</b>		



Last 4 of Applicant SSN: \_\_\_\_\_

**EDUCATIONAL DATA**

List any high schools, college/university, educational programs you have attended during grades 9-12.

Educational Institution (Name, City, State)	GPA	Attended From Mo/Yr. - To Mo/Yr.



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**CERTIFICATION LETTER**

I certify that I meet one of the eligibility requirements, meet all qualifications, and have read/understand the terms and conditions. I certify that I will abide by the following conditions if selected as a scholarship recipient:

1. Scholarship funds are to be used within the 2025-2026 academic year (Fall, Spring, and/or Summer semesters) at an accredited college, university, vocational, technical or trade school.
2. As a scholarship recipient, if chosen, I understand that I must provide the name and address of the school where I am accepted for the 2025-2026 academic year (Fall, Spring, and Summer semesters), i.e. verification form and proof of enrollment (i.e. class schedule) to the scholarship committee by 1 September 2025. Unclaimed funds will revert to the ESC Scholarship Fund.
3. Scholarship funds are to be applied to tuition, fees, room and board, and/or books at an accredited college, university, or technical school.
4. The ESC scholarship, when combined with other scholarships, must not exceed the cost of tuition, fees, room and board, and books for the applicable academic year. I agree that any remaining funds must be returned to the ESC Scholarship Committee as soon as possible.
5. If I accept an appointment to a military service academy or a **FULL** scholarship (to include tuition, fees, room and board, and books), I understand I will be ineligible for this ESC scholarship award and must notify the Edwards Spouses Club within 30 calendar days. I agree that any funds must be returned to the ESC Scholarship Committee as soon as possible.
6. If I receive the GI Bill or accept a scholarship from another military officers'/ enlisted spouses' organization that pays **FULL** tuition, fees, room and board, and books, I understand I will be ineligible for this ESC scholarship and will need to notify the Edwards Spouses Club Scholarship Chair immediately. I agree that any funds must be returned to the ESC Scholarship Committee as soon as possible.
7. I am a responsible citizen in good standing in the school and the community.
8. It is my responsibility to notify the ESC Scholarship Committee of any change of status (e.g., change of schools, change in address, acceptance of full scholarship, etc.) Failure to do so may result in the forfeiture of my scholarship award.
9. If any of the above conditions are violated, scholarship funds must be returned to the ESC Scholarship Committee.

I agree that my signature on this form will authorize the ESC Scholarship Chair to release this application, essays, social security number, GPA, and transcript(s) to the Scholarship Committee and elected judges, as needed.

If I am awarded an ESC scholarship, I agree that my signature on this form will authorize the ESC to publish my name and/or image on the ESC official website, to the membership of the ESC, which may also include publication at the Thrift Store at Edwards AFB and/or newsletters.

I certify that all information in this application is accurate to the best of my knowledge, and the essay is entirely my own effort, and no information within this application package is plagiarized.

**Applicant's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



Last 4 of Applicant SSN: \_\_\_\_\_

**SCHOLARSHIP APPLICATION CHECKLIST OF ITEMS TO BE SUBMITTED**

This application becomes complete and valid only when all the items listed below are complete/delivered. The completed scholarship package must all be submitted or postmarked by 15 April 2025.

- \_\_\_\_\_ Completed ESC scholarship application (this document).
- \_\_\_\_\_ Each page of completed scholarship application has the last 4 of Applicant's SSN.
- \_\_\_\_\_ \*\*Essay written: "Why is continuing your education important to you, and what made you decide on the school/program you have chosen?" Use criteria below.
- \_\_\_\_\_ Choose 1 of the following:
  - \*\*Essay: "Describe a topic, idea, concept, or passion you find so engaging, it makes you lose all track of time. Why does it captivate you? What or who do you turn to when you want to learn more?" Use criteria listed below.  
OR
  - \*\*Essay: "Describe how the military lifestyle, or your affiliation with the military, has impacted your view of society, culture, or future goals?" Use criteria listed below.  
OR
  - \*\*PowerPoint presentation: "Why have you chosen your future program, if you are an artist, feel free to show your work, photography, forensics, etc. (minus self-identifiers)" – in this option there is availability to show your work or interest. Use criteria listed below.
- \_\_\_\_\_ Transcripts supporting all educational data and documenting your GPA at the end of the first semester of your current school year (Note: unofficial transcripts will be accepted). If unofficial transcripts are not available for Fall 2024 academic semester, other timestamped grades/GPA documentation may be accepted.
- \_\_\_\_\_ Two (2) completed recommendations. It is recommended to ask people who are acquainted with the applicant's entire background, especially their scholastic achievement, to complete the forms. The recommendations may not come from family members.

\*\*Place your SSN (Last 4 ONLY) in the upper right corner and word count at the end of the essay(s) and/or PowerPoint. **DO NOT** use your name, school, position, pictures of self, or other self-identifiers\*\*

Essay and PowerPoint will be reviewed based on:

1. Organization and Structure – thesis, introduction, body, conclusion, and transitions
2. Mechanics – grammar, spelling, punctuation, and sentence structure
3. Content – consistency, focus, and elaboration
4. Presentation – professional appearance and liberties taken for creativity

Essay: 300-500 words

PowerPoint: 10 slides or less

**Notifications of scholarship recipients to be shared: May 2025**