



Last 4 of Applicant SSN: _____

Spouse Scholarship Application 2024-2025 Academic Year

APPLICATION INSTRUCTIONS

1. The application can be downloaded via Edwardsspouses.com/scholarships please fill out the form and submit via email* to 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.

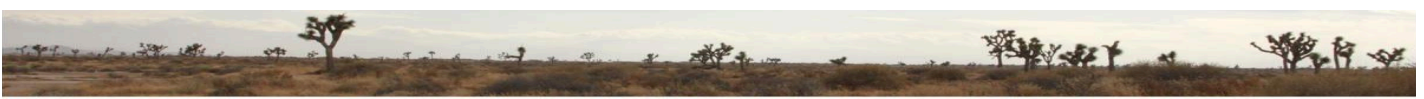
If you are planning to attend a nontraditional college, or a training program please answer the following question. Please mark "N/A" if this does not apply to you.

Training Program Name:	
Anticipated Length of the full program:	
Anticipated cost of the ENTIRE program:	
Anticipated cost of the 2025-2026 school year:	

COMMUNITY/VOLUNTEER SERVICE

List volunteer work with service, religious and other community organizations or clubs of which you were involved in the last 4 calendar years (2022-2025). List most recent first.

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



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EDUCATIONAL DATA

List any high schools, college/university, educational programs you have attended.

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 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: _____



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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: “How has military life impacted your education aspirations and career goals? How will this scholarship help you to fulfill your goal?”
- _____ 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 applicable. 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 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

Essay: 300-500 words

Notifications of scholarship recipients to be shared: April 30, 2025