



Dear Applicant,

Hope For The Warriors® Scholarships were created in response to the sacrifices of U.S. military service members in the Global War on Terror and the desire to provide their spouses or caregivers with the opportunity to pursue postsecondary higher education to assist them in maintaining the financial well-being of their families. As such, Hope For The Warriors® Scholarships are open only to legal spouses or caregivers of U.S. military service members who were wounded/injured or killed while in the line of duty between September 11, 2001 and the present.

We want to thank you for your family's dedicated service to the United States Armed Forces and invite you to complete the Scholarship application packet below and mail it to:

Hope For The Warriors®  
Spouse/Caregiver Scholarships Program  
1001 S. MacDill Avenue, Suite 812  
Tampa, FL 33629

All complete applications must be **post-marked** no later than Monday, April 2, 2012. Scholarship recipients will be notified in writing no later than May 16, 2012. If you do not receive a letter by May 25<sup>th</sup>, you have not been awarded a scholarship.

Good Luck,

*Mirka*

Mirka J. Young  
Hope For The Warriors®  
Spouse/Caregiver Scholarships Director  
[myoung@hopeforthewarriors.org](mailto:myoung@hopeforthewarriors.org)



## Fall 2012 Scholarship Application

**Hope For The Warriors®**, as part of its effort to ensure that the sacrifices of servicemen and women and their families are not forgotten, nor their needs unmet, awards scholarships to spouses and caregivers of Wounded U.S. service members and Fallen Warriors as defined below. The purpose of these scholarships is to identify, recognize and reward exceptional spouses for their strength, fidelity and resolve despite adversity and to aid in their continued education at a reputable, accredited college or trade school as they assume critical roles in the financial well being of their families.

Scholarship awards are **\$5,000** to be made payable **to the scholarship recipient's institution** for payment of tuition, books and supplies and may be reapplied for up to four years for a maximum of \$20,000. *The application process is the same for new and past applicants.*

**Please complete the following information.** *Only neatly completed applications will be accepted.*

Name First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Date of Birth \_\_\_\_\_ SSN \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Sponsor \_\_\_\_\_ Rank E \_\_\_ O \_\_\_ Status  AD  RET  DEC  DIS

Branch of Service  Army  USMC  Navy  National Guard  Coast Guard  Air Force

Service Member's SSN \_\_\_\_\_ Service Member's Last Unit of Record \_\_\_\_\_

Nature of service member's injury \_\_\_\_\_

High School/College(s) Attended \_\_\_\_\_ City, State \_\_\_\_\_ Date of Graduation \_\_\_\_\_

Accredited College or Trade School to which you have applied/been accepted to/are attending \_\_\_\_\_

Anticipated Date of Graduation \_\_\_\_\_

Have you ever applied for the Hope For The Warriors® Scholarship in the past?  yes  no

If yes, how many times? \_\_\_\_\_ If awarded, which scholarship and when? \_\_\_\_\_

## **Applicant Eligibility/Requirements**

All applicants must submit the following:

1. Provide proof that the applicant is a legal spouse or caregiver of a U.S. military service member who was wounded/injured or killed in the line of duty between September 11, 2001 and the present. Please provide one of the following:
  - A. If the service member is still on active duty, retired or KIA, applicant must submit a copy of the front and back of their Military ID.
  - B. If the service member was discharged, applicant must show either DD214 form or retirement order documents with a marriage certificate.

\*Caregivers who are not spouses must submit a notarized document showing proof of guardianship.

Applicants may request assistance in verification from the Scholarship Coordinator by sending an e-mail to [scholarship@hopeforthewarriors.org](mailto:scholarship@hopeforthewarriors.org).

2. Proof of U.S. residency
3. Have applied to and/or are currently enrolled in an accredited college or trade school for the current school year, in pursuit of a Bachelor's or Master's degree or vocational program pursuing certification.
4. Show proof of satisfactory academic progress: Score of at least 650 on the GED, High School transcript showing a 2.6 overall GPA based on a 4.0 scale or similar rating if within the last 5 years. *Unofficial transcripts will be accepted.*
5. Provide two letters of recommendation - one must be completed by an education or business professional or employer/volunteer coordinator/supervisor. Only letters of recommendation accompanying the application package will be accepted. Each letter must be in a sealed envelope.
6. Submit an original typed, double-spaced essay, with no more than 500 words concerning this topic: **"Describe how your life has been impacted by the Global War on Terror and how that impact played a role in your pursuit of higher education."**  
Please include the question at the top of your essay. Please omit your name and other identifiable information.
7. Fill out the two-page questionnaire (pages 5 and 6) completely. (Included in the application)
8. Provide one of the following documents for proof of injury: 199, PEB, VA Eligibility Letter, Purple Heart Award or Official Letter from Military Chain of Command or VA Care Coordinator.

## **Selection Process**

Applicants must complete and submit the attached application/certification forms along with proof of service, proof of injury/death, original essay, two-page questionnaire and two letters of recommendation. Incomplete packages will not be accepted. Incomplete packages will be returned to the applicant. Any documents submitted after the post-mark deadline will not be accepted.

Applicants will be selected for scholarship award recommendation based on their eligibility, their commitment to succeed as indicated by academic achievement, personal goals, letters of recommendation, and original essay. Scholarship award recommendations and final selection will be at the discretion of the Hope For The Warriors® Scholarship Committee. Applicant anonymity will be preserved during the selection process. *All members of the Scholarship committee are ineligible for scholarships.*

**Time Table**

**Post-mark deadline**

**April 2, 2012**

**Scholarship Award Notification**

**May 16, 2012**

**Please submit all questions to [scholarship@hopeforthewarriors.org](mailto:scholarship@hopeforthewarriors.org).**

**Certification**

Read and sign the following Statement of Certification to be eligible for consideration:

- I certify that I am a legal spouse or caregiver of a U.S. military service member who was wounded/injured or killed while in the line of duty between 2001 and the present.
- I understand that my application is not an indicator that a scholarship will be available and that eligibility, criteria and the awarding of scholarships will be at the final and sole discretion of the Hope For The Warriors® Scholarship Committee.
- I certify that all information provided is complete and accurate to the best of my knowledge.
- I certify that I will be a full-time or part-time student for the upcoming academic year.
- I understand that if I do not finish the semester or otherwise cease to meet eligibility, I must forfeit and return any scholarship monies awarded to me. I further understand that the unused balance of any scholarship monies awarded to me may be carried over to a subsequent term, but upon graduation, any unused balance must be surrendered.
- I give consent, in accordance with the Family Education Privacy Rights Act, to allow financial or academic/enrollment information. I further allow military dependency status and information regarding my spouse's injuries or death to be released to the appropriate parties to be used as verification of eligibility for this scholarship.
- I give consent to use my likeness in photos, name, etc in the publicity and promotion of the Hope For The Warriors® Spouse/Caregiver Scholarships Program.
- I certify that I have read this application and and accept all conditions.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_



Fall 2012 Scholarship Questionnaire

**A. Injury questions:** (If KIA spouse, please proceed to **B**)

1. Was your service member medically evacuated out of country?  yes  no  not sure
2. Was your service member's injury significant enough to require hospitalization after he/she returned home?  yes  no  not sure If yes, how long? \_\_\_\_\_
3. Did your service member ever return to full-duty status?  yes  no  not sure

**B. Personal questions:**

1. Do you work outside the home?  yes  no If yes, how many hours per week? \_\_\_\_\_
2. What is your current job title? \_\_\_\_\_
3. Are you a stay-at-home parent?  yes  no
4. Do you have children?  yes  no If yes, how many? \_\_\_\_\_ Ages? \_\_\_\_\_
5. Are you currently enrolled in an education program?  yes  no  
If yes, how many hours per week? \_\_\_\_\_
6. Do you volunteer in the community?  yes  no If yes how many hours in the past year?  
\_\_\_\_\_ Where do you volunteer? \_\_\_\_\_
7. What do you like to do in your spare time?

---

---

---

8. Where do you see yourself in 10 years?

---

---

---

**Work History:**

Please list your job history (no more than 4):

Company Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Awards, special accomplishments (Dean's list, other scholarships, etc):**

---

---

---

**Completed degrees (if any). Please include dates:**

---

---

---

**Please tell the scholarship committee one thing about yourself that was not shared in the essay...**

---

---

---

---

---

---

## Scholarship Application Check List

- Application
  - Signature
  - Intended College
- Proof of Service Identify: \_\_\_\_\_
- Proof of Injury/Death Identify: \_\_\_\_\_
- Notarized document showing proof of guardianship (Caregivers only)
- Original Essay (No more than 500 words)
- 2-Page Questionnaire completed
- Professional or academic letter of recommendation
- Second Letter of Recommendation
- 2.6 GPA or 650 on GED