APPLICATION FOR APRIL SCHOLARSHIP

Name: ____________________________________________

(First)                                     (Middle)                                         (Last)

Telephone:       Office: ________________________________

Employment Information

Employment Status: Career: ____________ Career-Conditional: ______________

Full Time Employee  (Scholarship not available to part-time or intermittent employees)

Current Position Title: ___________________________________________________________

Cost Center / Department: ________________________________________________________

Length of Time in Current Position: ________________________________________________

Brief description of your job duties: ________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

Supervisor’s Name:_____________________________________________________________

List any other positions you have held at the U.S. Naval Academy:

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________
**Applicant’s Education**

Name and location of high school attended: _____________________________________________
_________________________________________________________________________________

Did you graduate? Yes ____ (Month/Year ____/____ ) No ____ Highest grade completed: _____

<table>
<thead>
<tr>
<th>Name &amp; Location of Any Completed College or University</th>
<th>From Date</th>
<th>To Date</th>
<th>Credits Completed</th>
<th>Type of Degree &amp; Year Earned</th>
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Major field of study at highest level of college work: ________________________________
_________________________________________________________________________________

Other schools or training completed, for example: trade, vocational, armed forces, or business. Give for each, the name and location of school, dates attended, subjects studied, number of classroom hours of instruction per week, certificate(s), and other pertinent data.
_________________________________________________________________________________
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List any honors, awards, or fellowships received: ________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
**Educational Institution in which Enrollment is Desired/Accepted**

Institution’s name: __________________________________________________

City/State: _______________________________ Have you been accepted? __________

Course of study: __________________________ Degree sought: __________________

Expected date of degree completion:____________________

<table>
<thead>
<tr>
<th>Anticipated Expenses Per Semester</th>
<th>Fall/Winter</th>
<th>Spring/Summer</th>
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<tr>
<td>Tuition/Fees</td>
<td></td>
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<tr>
<td>Books</td>
<td></td>
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<td>Lab Fees</td>
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<td>Other (Please specify)</td>
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<tr>
<td><strong>Totals</strong></td>
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**Special Interests**

Please list any extra-curricular, community, and/or service activities in which you participate in:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What are your career and/or educational goals?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

You are encouraged to provide any additional information that you think the Scholarship Committee should consider in reviewing your application, such as financial hardships or other important reasons why you should be considered for this scholarship. Please use additional paper if necessary.
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Financial Information

My federal salary is ___________________  My total income is _____________________

My family’s total income is: _____________________________________________________

Number of dependents in family (including yourself) ________________________________

Financial Obligations

Please describe any unusual financial obligations such as other family members enrolled in college (not paid for through their employment), alimony, child support, medical expenses (not covered by insurance or other federal programs), child care/elder care expenses, need to pursue another career position. Normal expenses such as rent/mortgage, utilities, car payments, credit card debt, etc. are not considered financial obligations for the purpose of this entry.

_____________________________________________________________________________
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References:

Letters of reference or recommendation may also be submitted with your application, but are not required.

I hereby acknowledge that the information provided herewith is true, complete and correct.

__________________________________  _________________________________________
Date                                      Applicant Signature