

**ARMY SPOUSES' CLUB of the GREATER WASHINGTON AREA
2019 MEMBER/SPOUSE SCHOLARSHIP APPLICATION**

Applicant:

Name:

Address:

City:

State:

Zip Code:

E-mail address:

Telephone #:

Applicant's Sponsor:

Name:

Address of sponsor if different from applicant:

Address:

City:

State:

Zip Code:

Has the applicant received an ASCGWA scholarship in a previous year?

Yes No

If yes, category in which scholarship was received:

High school College Spouse Year received:

AGREEMENT

The undersigned applicant and sponsor hereby understand and agree to be bound by the following terms if the applicant is awarded an ASCGWA Scholarship for the 2019-2020 school year:

1. If the applicant accepts a service academy appointment or other full scholarship, or fails to matriculate at a post-secondary institution in the fall of 2019, the applicant is not eligible to accept the Scholarship. The applicant agrees to immediately notify the Scholarship Committee by e-mail of such acceptance or failure to matriculate. If the Scholarship check has been mailed prior to such notification, the applicant agrees to request the institution, to which such check was sent, return such check to ASCGWA. The applicant agrees if said scholarship funds are paid to the applicant by the institution rather than returned to ASCGWA, the applicant will immediately return said scholarship funds to ASCGWA.

2. Scholarship funds awarded by ASCGWA will be paid to the institution the applicant will attend and not to the applicant. Scholarship funds are restricted to the payment of tuition, fees and other required educational expenses.

3. The applicant and sponsor hereby grant ASCGWA permission to use the applicant's name and image for the purpose of publicizing the Scholarship in media outlets, including print, newspapers, magazines, radio, television and online, and specifically in *Backchannels*, the *Pentagram*, and the ASCGWA scrapbook, website and Facebook page.

Applicant Signature

Date

Sponsor Signature

Date