

Part A – Application and Rules

FRA/LA FRA Scholarship Program

*Applicants – Submit this form for FRA or LA FRA Scholarships Only
Do not use this form for the Colonel Hazel Benn, USMC Scholarship*

**DEADLINE: Applications, Recommendations, and Transcripts
Must Be Postmarked No Later Than April 15, 2010
All Documents Postmarked After April 15, 2010 Will Be Disqualified**

Applicant's Name (Last, First, Middle Initial): _____

(Maiden Name, If Currently Married): _____

Scholarship Program For Which Applying Check One Only

FRA Scholarship

LA FRA Scholarship

Check All That Apply

Applying for: Undergraduate Scholarship Graduate Scholarship

Applicant is currently: High School Senior Undergraduate Student Graduate Student

1. All entries must be complete, accurate, legible, and printed in black ink. Read all instructions carefully. Review and understand all instructions before mailing.
2. We define: **Sponsor** as a FRA member in good standing (living or deceased) who may be the applicant, a parent, a grandparent, or a legal guardian. **Head of Family** as the person who provides support (housing, food, financial support etc.) to the applicant. **Dependent** is an individual who meets the U.S. IRS definition as it relates to the sponsor or head of family.
3. Ensure that the information you enter about the Sponsor accurately describes their latest military status. For example, if the Sponsor is on active duty, the information must describe their current affiliation, status, et cetera. If the Sponsor is retired or deceased, the affiliation, status, et cetera, must be that which pertained to the sponsor at the time of their retirement or death.
4. **Gross income** is to reflect total income from **all** sources. This includes investment income, savings income, retirement incomes, all forms of military pays (base pay, BAH, BAS, family separation, sub pay, flight pay, combat/hazardous duty pay, etc.) **Net income** is to reflect taxable income reported to IRS.
5. Applicant must sign the application forms and ensure that it is also signed by the head of family. Through your signatures, and in consideration for the ability to participate in the scholarship process, you hereby grant the right for any information to be independently verified and waive any and all liability or appeal for the process and the selections made (including not being selected).
6. Submit one (1) application for FRA Scholarships and one (1) separate application for the LA FRA Scholarships. Mail in separate envelopes to the addresses indicated. Do not apply for a FRA and a LA FRA scholarship on the same form! **Do not use the FRA / LA FRA scholarship application for the Col. Hazel Elizabeth Benn, USMC Scholarship.**
7. **Scholarship recipients are notified by telephone and in writing by early July.** Recipient must be a U.S. Citizen and attend a college located in the United States. If you are selected to receive a FRA scholarship, your photo and excerpts from your essay may be used for promotional materials. **FRA is unable to notify the applicants who have not been selected for a scholarship award.**
8. **Most important** – We must receive official or certified academic documents (i.e. high school, college transcripts, test scores), your essay and two recommendations in order for us to consider any application for a FRA; LA FRA; or Col. Hazel Elizabeth Benn, USMC Scholarship.
9. We do not acknowledge receipt of application, if the application was submitted correctly, or if you were not selected for a FRA scholarship. If an applicant wants to know if their application has been received, please enclose a self-addressed stamped postcard (not an envelope) that states "Scholarship application has been received." We will date it and mail it back to you.

FRA Applications: FRA Scholarship Administrator
125 N. West Street
Alexandria, VA 22314-2754

LA FRA Applications: LA FRA Scholarship Administrator
125 N. West Street
Alexandria, VA 22314-2754

APPLICANT INFORMATION

1. Applicant Name:

2. Home Address:

3. Current School Address:

High School

College

4. Home Phone Number:

5. School Phone Number:

6. Date of Birth:

7. Applicant's Marital Status:

8. Gender:

M F

9. U.S. Citizen:

Y N

10. Applicant's Email Address:

11. School's Email Address:

SPONSOR INFORMATION

1. Name of Sponsor:

2. Address of Sponsor:

3. Last Rank, Rate, or Grade Held:

4. FRA Membership #:

5. Branch/Unit/MAL Affiliation #

6. Date of Discharge/Retirement:

7. If Deceased, Date of Death:

7a. Did Sponsor Die While on Active Duty:

8. Relationship of Sponsor to Applicant:

9. Sponsor's Email Address:

You may apply for the FRA Scholarship Program if the sponsor is a member in good standing of the Fleet Reserve Association, currently or at time of death. Applicants must be FRA members or be the dependent, spouse, child or grandchild of a FRA member

Please Check All That Apply:

- A. The sponsor is: Living Deceased
- B. The sponsor's military affiliation: Navy Marine Corps Coast Guard Other
- C. The sponsor serves/served as: Regular Reserve
- D. The sponsor's military service: Commissioned Officer Service Only Commissioned Officer with Enlisted Service
 Enlisted Service Only
- E. The sponsor is: Retired
 Active Duty
 Reserve
 Veteran – Honorably Discharged

FINANCIAL INFORMATION

1. Name of Head of Family:		2. Home Telephone #:	
3. Occupation:		4. Work Telephone #:	
5. Email Address:		6. Relation to Applicant:	
7. Address if Different from Sponsor:			
8. Gross Family Income: (See Rule #4 on Page 1)		9. Net Family Income: (See Rule #4 on Page 1)	
10. Number in Household:		11. Number of Children in College:	
12. List Amount of Tuition, Room and Board, and Other Fees for Each College Student:			

APPLICANT'S FINANCIAL STATEMENT

13. Aid from Parent or Guardian (Annual Total): \$			
Educational Resources Rec'd or Awarded for Next School Year	Veterans Benefits: \$	Social Security: \$	Applicant's Savings and Income: \$
Other: \$	Loans: \$ Source:	Scholarship: \$ Source	Grants: \$ Source
14. Total of all Funds Available for Education During Year for Which Application for Scholarship is Made: \$			
15. Additional Comments: The applicant/parent/head of family/sponsor may comment on any specific circumstance which they desire to bring to the attention of the scholarship committee that impacts the financial status described above.			
Signature of Head of Family:			Date:

APPLICANT'S SCHOOL, COMMUNITY EXTRACURRICULAR ACTIVITIES, AND AWARDS
On a separate sheet of paper, please list school, community extracurricular activities, and awards.
 (Reference Part B – Instructions, Page 1)

APPLICANT'S EDUCATIONAL INFORMATION

1. Name and Address of High School Currently Attending or High School Graduated From:	2. Dates of Attendance:	3. Graduation Date:
4. Name and Address of College(s) Attended:	5. Date of Attendance:	6. Graduation Date:
7. Name and Address of Colleges to Which Applied:	8. Accepted: (Yes or No)	

APPLICANT'S WORK EXPERIENCE

1. Name of Employer:	2. Dates of Employment:	3. Description of Job:

Important – We must receive: (A) This completed application, (B) School transcripts, applicable academic documentation; (C) Two recommendations; and (D) Your essay in order to consider any application for our FRA; LA FRA; or Colonel Hazel Elizabeth Benn, USMC Scholarship Programs.
 (Reference Page 1 – Application, and Part B – Instructions, Page 1).

I have read and understand the Rules on Page 1 and Instructions (Part B, Page 1) and certify the information herein is correct to the best of my knowledge.

 Applicant's Signature Date