The Coast Guard Spouses' Association of Kodiak High School Senior Scholarship Application

APPLICANT INF	FORMATION		
Name:			
Address:			
City:	State:	Zip Code <u>:</u>	
Phone #:			
Email:			
ESSAY INFORM	1ATION		

Please answer the following prompts:

- 1. What institution and program are you planning on attending?
- 2. What are your educational/career goals?
- 3. Why do you believe you should be chosen as the recipient of this scholarship?

Provide any information that you think would be helpful to the Scholarship Selection Committee such as financial need, participation in community activities, future plans, special interests or concerns, and so forth. Your essay must be a minimum of one page, typed, and double-spaced.

I certify that this information is accurate and complete to the best of my knowledge. I authorize the release of information to confirm and/or verify this application. I further authorize the release of my name in connection with announcements of scholarship awards in the event that I am selected to receive this award.

Applicant Signature / Date

The Spouses' Association of Kodiak (SAK) will award one scholarship worth two-thousand and five hundred dollars (\$2,500) to one deserving high school senior.

SAK will also award two scholarships worth one-thousand and five dollars each (\$1,500) to two deserving high school seniors. The recipients of this scholarship may use the funds for any educational purposes (tuition, books, etc.). No person shall be awarded this scholarship more than once.

Applications may be submitted via mail or email.

cgspousesgrants@gmail.com

The Spouses' Association of Kodiak ATTN: Grants & Scholarships 7 Windrider Dr. Unit 335 Kodiak, AK 99615

APPLICATIONS MUST BE RECEIVED VIA MAIL OR E-MAIL NO LATER THAN Wednesday, March 1, 2024.

Late or incomplete applications will not be considered.