



Military Officers Association of America Pensacola Chapter

SCHOLARSHIP APPLICATION

Please complete the below information and mail to:
PMOAA SCHOLARSHIP, PO Box 17728, PENSACOLA, FL 32501-7728

(Please print or type)

Application Date: _____

Name: _____

Mailing Address: _____

City, State ZIP: _____

Phone Nos: (Home) _____ (Cell) _____

E-Mail Address: _____

Date of Birth: _____

ROTC or Reserve Status: ___ Yes ___ No

Name, Rank Service of Sponsor (Father, Mother, Spouse or Grandparent):

Address: _____

Street

City

State

Zip

Degree Seeking: _____ Major: _____

Total Credit Hours Earned/Cumulative GPA: _____

Name of High School: _____ Year Graduated: _____

Colleges/Universities Attended and Dates: _____

Awards/Honors: _____

Please submit the following on a separate sheet of paper:

1. List and describe your College/University Roles.
2. List and describe your Community Activities Leader Roles. *(Examples are helpful)*
3. List and describe any recent employment.
4. Include your essay not to exceed 750 words with your application. The topic is listed on the website information page under Essay Requirement. *(Any indication of plagiarism will result in disqualification.)*
5. Tell us why you should be selected.
6. Copy of your current Official College Transcript
7. Your ultimate education objective: Expand on your education objectives and how they may relate to your future career, i.e. "BS in Biology to pursue a career as a physician" etc.
8. This application must be signed by the applicant to be considered for approval.

Signature: _____

Date: _____