

2024

**MILITARY DEPENDENT SPOUSE
SCHOLARSHIP APPLICATION PACKET**

Sponsored by the
Maxwell-Gunter Spouses' Club

MAIL SCHOLARSHIP PACKET TO:

Maxwell-Gunter Spouses' Club (MGSC)
Attn: Scholarship Chairperson
P.O. Box 9935
Montgomery, AL 36108

The MGSC is dedicated to assisting various organizations with charitable donations and awarding college scholarships. Thanks to our hardworking volunteers at the Maxwell Thrift Shop, located in Building 851, 206 West Selfridge Street, Maxwell AFB, the MGSC can fund charitable endeavors such as these scholarships.

Each year, the Maxwell-Gunter Spouses' Club (MGSC) proudly awards scholarships to dependent spouse students who exhibit potential and desire to complete a program leading to a college degree or certification (full or part-time/6 hours per semester). Financial support for these awards is provided by the Maxwell Thrift Shop. Scholarships are awarded to the selected students based on academic excellence and involvement in the school and community.

Scholarship amounts will be determined by funding availability. All awards may not be given if candidates do not meet eligibility and selection criteria.

ELIGIBILITY REQUIREMENTS: At the time the scholarship application is due, the dependent spouse must possess a high school diploma or equivalent, and must meet the following criteria:

- Planning to seek an undergraduate, graduate, associate, or similar degree/diploma from an accredited 2- or 4-year college, university, or vocational-technical school; **AND**
- Be a dependent of an Active Duty, National Guard, or Reserve military member assigned to Maxwell-Gunter, **OR** be the dependent of a Retired or Deceased military member; **OR** be the dependent of a sponsor whose military personnel flight is the 42d Force Support Squadron **AND**
- Reside within a 30-mile radius of Maxwell-Gunter AFB.

The Scholarship Committee shall determine eligibility. A separate/independent review committee will be the final determining body for awarded scholarships. Each recipient is notified by mail of his or her selection. The award will be withdrawn if the recipient fails to enroll in an institution of higher learning within six months of receiving said award.

SELECTION CRITERIA:

- Academic record: Official transcripts
- Extracurricular activities: Volunteer/community service
- Honors and awards
- Employment
- Letter of recommendation
- Student Essay

SSN Last 4: _____

APPLICANT CHECKLIST

All applications must be postmarked **NO LATER THAN FRIDAY, FEBRUARY 16, 2024**. For more information contact: scholarshipsmgsc@gmail.com. Applicants will receive an email confirming receipt of their application by March 1, 2024. **Failure to complete these instructions correctly will result in disqualification. Use this checklist as you complete your application packet to include:**

___1. Completed Personal Data Sheet (page 4).

___2. Category of Application (page 5). Official Transcripts from High School or College. These documents must be included in your application packet. *Official copies may be returned to you later upon request.

___3. Completed Activity Data Sheets (pages 6-7). You may make additional copies of these forms, if needed, but the information must be submitted on this form. Do NOT include a resume.

___4. Letter of Recommendation, no more than 100 words (page 8). This recommendation may not be from a family member. It should be from an employer, teacher, or anyone you have contact with on a regular basis--- someone who knows you and can attest to your character. **Give a copy of the form to your reference and ask them to return it to you in a SEALED envelope with their signature over the seal.** A letter of recommendation **must** be included with your completed application.

___5. Student Essay. Attach a typed written essay of 350-500 words. Must be double spaced using 12 pt. font. Please include the question at the top of your essay page.

Resilience is an important quality for military members and their dependents to possess. Describe a time you showed resilience.

- Do **NOT** use your name, school, or position so that the essay may be evaluated objectively.
- **The last 4 digits of your SSN must be placed at the bottom of the page(s)** for identification purposes. Without the number, your essays are not identifiable.

___6. Certification page (page 9)

___7. A photocopy of the front and back of your dependent ID card, or a notarized letter attesting to your possession of a dependent ID card, or you may arrange to show your ID card to Scholarship Chairperson.

___8. Mail completed application packet no later than **February 16, 2024** (write in SSN Last 4 on bottom of each page) to:

Maxwell-Gunter Spouses' Club (MGSC)

Attn: Scholarship Chairperson

P.O. Box 9935

Montgomery, AL 36108

SSN Last 4: _____

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PERSONAL DATA SHEET

APPLICANT'S INFORMATION	
NAME (Last, First, Middle):	
Applicant's Last 4 (SSN):	
Address (Street, City, State, Zip):	Name Of High School or College most recently attended:
	Email Address:
Home Phone:	Cell Phone:
SPONSOR'S INFORMATION	
Sponsor's Eligibility Category: (Circle) Active-Duty National Guard Reserve Retired Deceased Deployed/Remote	
Sponsor's Name:	Sponsor's Rank:
Sponsor's Organization:	Sponsor's Last 4 (SSN):
Duty Phone:	Cell Phone:
Current Address if different than applicant:	Email address:
	Sponsor's ID Card Expiration Date:

Have you applied for or received a MGSC scholarship in this category in the last 3 years? _____

If yes, please list dates and amounts received _____

How did you hear about our scholarship? (Google, Facebook, email, word of mouth, other)

Are you a member of the Maxwell-Gunter Spouses Club? _____

SSN Last 4: _____

CATEGORY OF APPLICATION

____ Undergraduate student
____ Graduate student

EDUCATIONAL DATA List all schools previously attended with most recent listed first.		
High Schools or Colleges attended (Name, City, State)	Dates Attended From Month/Year To Month /Year	GPA

Total semester hours completed (if applicable) _____

Major Course of Study _____

Please include an official transcript from high school or college. *Official copies may be returned to you later upon request.

SSN Last 4: _____

ACTIVITY DATA SHEET (1)

VOLUNTEER/COMMUNITY SERVICE List volunteer activity for the last 2 years. This may include civic, religious, and other community organizations. **Include leadership roles and responsibilities.** Verification of service may be required. Unpaid practicum/internships go here. List each activity on a separate line.

Volunteer Organization	Description of Service	Dates of Service

ACADEMIC AWARDS/HONORS List each academic award or honor received

SSN Last 4: _____

CERTIFICATION

I certify that the information in the application and activity data sheets is accurate to the best of my knowledge, and my essay is entirely my own effort. I further certify that I am a military dependent spouse, in possession of a valid military ID in my name, and I meet all other MGSC Scholarship Award eligibility requirements. Should I accept an MGSC Scholarship Award, I acknowledge that the following restrictions apply:

1. Enrollment verifications should be submitted to the MGSC no later than December 1, 2024 and awards used before January 1, 2025. If an extension is necessary, the recipient must contact the Scholarship Chair and provide an explanation no later than December 15, 2024. scholarshipsmgsc@gmail.com
2. The MGSC will send the scholarship award directly to the accredited institution where the recipient's account is maintained. Recipients are required to submit verification of their enrollment status prior to receiving their award. All funds shall be applied to tuition and/or associated costs administered by a regionally accredited college or university. Unique circumstances will be handled on a case-by-case basis.
3. Children, wards, or spouses of any MGSC Scholarship Committee member are ineligible for a scholarship in the year that person serves.

Should I accept an MGSC Scholarship Award and violate any of these restrictions, or if I failed to meet the eligibility requirements at the time the application was due, my sponsor and I agree to return all award money to the MGSC. Relinquished scholarship money will be dispersed at the discretion of the Scholarship Committee.

In accordance with the Privacy Act of 1974, I agree that my signature on this form will authorize the Scholarship Chairperson to release copies of my transcripts, scholarship application, the last 4 of my social security number, and other auxiliary data to the Scholarship Committee and judges as needed.

APPLICANT'S NAME (Print) _____

SSN (Last 4): xxx-xx-_____ PHONE _____

APPLICANT'S SIGNATURE: _____ DATE _____

SPONSOR'S SIGNATURE: _____ DATE _____

(Waived if Sponsor is deployed, on remote or deceased – Please indicate on signature line)

Please review your application prior to mailing. Only fully completed applications will be accepted by the MGSC Scholarship committee. Failure to accurately follow directions will result in disqualification. Good Luck!