## **Union County Military Family Support Group**

# The Major General and Mrs. Oscar C. Decker Jr. Community Service Scholarship

### **Application Form For The 2024 Decker Scholarship**

(Please Clearly Print or Type All Responses)

#### **PERSONAL INFORMATION:**

Name of Applicant:			
Last First		Middle Initial	
Address: (NOTE: Applicant must live in Union C	ounty)		
Street & Number			
City or Town	State	Zip Code	
Telephone # (Home and Cell):		Email Address	
Name of Parents/Guardian		Telephone Numbers (Other than Home	<del>4</del> )
Are you currently employed: (Please Circle)	YES	NO	
If employed, give the name, address, and ph	one # of	employer:	
Name of Employer	Ad	ldress	
Days and Hours of employment:			
What is the best time for to contact you:			

## **SCHOLARSHIP ELIGIBILITY REQUIREMENTS:**

NOTE: Applicants must attend	d a school in the Fairbank	ks, Marysville, or North U	nion School	Districts.		
Are you a High School Senior who will graduate this year: (Circle)  (Applicant must be a Graduating Senior)						
Are you home-schooled: (C If yes, in what Union County S		<b>:</b>				
If not home-schooled, wha	t High School do you	attend:		· · · · · · · · · · · · · · · · · · ·		
Name, Telephone Number	, and Email Address o	of School Counselor:				
Name	Telephone #	Email Address				
What is your Grade Point (Applicants must have at least		y of latest Report Card)				
Have you taken any colleg	e courses so far: (Pleas	se Circle) YES NO	)			
If YES, please explain:						
Have you been accepted to (Applicant must have proof of	•	•	ease Circle) <b>Y</b> I	ES NO		
Name of Colleges/Universi	ities you plan on atten	iding and start date:		-		
If not yet accepted, please	explain:					
(Note: Proof of acceptance mu	ust be provided before the	e scholarship check will be	e issued)			
What will be your Major/(	Course of Study:					
What degree will you get u	ipon completion of stu	udy: BA BS Other	(Explain)			
What other Short and Lor	ng-Term Goals do you	have:				

## **ELIGIBILITY REQUIREMENTS** (Continued)

List all Recent Extra-Curricular Activities (Clubs, Sports, Scouts, etc) (Years of Membership and Leadership Positions Held): (Attach another page if needed)
*Attach a one-page personal letter addressed to the Decker Scholarship Selection Board explaining why <u>YOU</u> should be considered for this scholarship. Provide details of your demonstrated history of selfless service/community service which has benefitted your community/others. (Examples: city,village, neighborhood, school, church, hospital, etc)
Provide the name (s), phone number(s), and email address(es) of <u>at least one adult</u> who can verify your act(s) of selfless service/community service. Also explain how they are able to make this verification. NOTE: Individual(s) cannot be a relative(s).
*Attach three (3) Letters of Recommendation from adults (other than relatives) stating why you should be considered for this scholarship. These individuals <u>may</u> be those verifying your selfless service/community service, and/or from school officials.
You may provide any additional information that supports your eligibility for this scholarship:

#### **DECLARATION BY APPLICANT:**

I have read the **Application Cover Letter** (all three pages), and I understand the application process for the UCMFSG Major General and Mrs. Oscar C. Decker, Jr. Community Service Scholarship.

During the 2024-2025 academic year, I will attend an accredited College or University.

I believe that I meet the eligibility criteria for this scholarship. Furthermore, I certify that the information provided on this **Application Form**, and in the supporting documents, is to the best of my knowledge, true, accurate, and complete.

I understand that my application will be reviewed by the Decker Scholarship Selection Board, and that I <u>may</u> be required to appear before this Board as a part of the selection process. I also understand the Board's recommendation is forwarded to the UCMFSG Executive Committee, and that the decision of the UCMFSG Executive Committee regarding the scholarship award is final.

If I am selected to receive this scholarship, I agree that my name and photo <u>may</u> be used by the UCMFSG to announce the award publicly within local news media and on the UCMFSG website and Facebook page.

Applicant Signature:	Date	
Parent/Guardian Signature:	Date	

<u>NOTE</u>: The completed Application Form (four pages), and all required supporting documentation, must be submitted no later than the suspense date mentioned in the Application Cover Letter.

Mail the completed application and supporting documents to the following address:

Union County Military Family Support Group ATTN: Decker Scholarship Selection Board Post Office Box 1001 Marysville, Ohio 43040