



3355 Tesoro Circle, New Smyrna Beach, FL 32168

To: School Guidance Counselor

This year the West Volusia MOAA Chapter (WVMC) is offering two \$1000.00 scholarships. The scholarship recipients will be an eligible graduating senior from any of the four West Volusia High Schools. The scholarships are being offered to eligible seniors who are either a JROTC Cadet and/or a child of a military veteran. It is our intent to reward the academic achievement of these students in keeping with the MOAA National Scholarship Program eligibility criteria.

Eligible Seniors must meet the following requirements:

1. The student has demonstrated academic merit;
2. The student must provide a current copy of their official transcript;
3. The student must provide his/her ACT or SAT scores;
4. The student must show proof of enrollment at a 2- or 4-year institution of higher learning.
5. College enrollment in a Senior ROTC program is encouraged but not required.
6. Applicants whose parent(s) is a military veteran must provide documentation. (i.e. DD 2 14, copy of Military ID or Florida Veterans' ID)

Standards for application are further explained in the enclosed Scholarship Application.

There are no limits on the number of applicants. Please feel free to make as many copies as necessary.

Your cooperation in ensuring that your graduating seniors are made aware of our scholarship program is appreciated.

All applications must be submitted no later than April 15, 2023. For additional information please contact the Scholarship Liaison Officer at lrwickett52@gmail.com or call 321-604-6694.

Sincerely,

A handwritten signature in black ink, appearing to read "Laura R. Wickett". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Laura R. Wickett, LTC, USA, RET
Scholarship Liaison Officer



WEST VOLUSIA MOAA CHAPTER

POC: LTC Laura Wickett, USA (RET)

c/o LtCol Twila Davis 3355 Tesoro Cir ♦ New Smyrna Beach, FL 32168

BACKGROUND

The West Volusia MOAA Chapter (WVMC) offers two annual scholarships to eligible Seniors of a West Volusia High School (DeLand, Deltona, Pine Ridge, or University).

SCHOLARSHIP APPLICATION

CRITERIA:

GENERAL INFORMATION: The WVMC awards two annual \$1000.00 scholarships to a JROTC Cadet and/or a child of a military veteran.

ELIGIBILITY: Applicants must be a Graduating Senior of one (1) of the four (4) High Schools in West Volusia County.

SELECTION CRITERIA: Applicants must be recommended by the Senior Military Instructor (SMI) of their JROTC Unit. Or the School Guidance Counselor. Applicants must submit a current official transcript and ACT/SAT scores as attachments.

REQUIREMENT: The application must be completed in its entirety, to include attachments, in order to be considered.

DEADLINE: All applications must be submitted and received no later than 15 APRIL of the applicant's senior year. Mail the completed application to the above address, Attention: Scholarship Selection Committee.

ANNOUNCEMENT OF SELECTEE: WVMC announces the selectee at the respective school's "Scholarship Awards Ceremony" or the "JROTC Awards Ceremony" toward the end of the school year.

AWARD PRESENTATION: The funds will be released to the selectee upon presentation of proof of enrollment in an institution of higher learning . .

PRIVACY: WVMC and members of the Scholarship Selection Committee warrant that all information provided by the applicant shall be used only for the purpose of consideration of the application, and for no other purpose.

APPLICANT INFORMATION

APPLICANT'S NAME: _____

ADDRESS: _____

CITY, STATE & ZIP CODE: _____

TELEPHONE: _____

DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER (Last four digits ONLY): XXX-XX-_____

JROTC UNIT (if applicable): _____

CERTIFICATION & RELEASE OF INFORMATION : By my signature hereon I certify that all information provided in connection with this application is complete, true, and correct to the best of my knowledge and belief; and I authorize the verification of such information by the WVMC to such extent as that organization may consider appropriate; and I further authorize the release of such information by the authorities at the school in which I am currently enrolled.

Applicant

Signature: _____ DATE: _____

SMI or Counselor CERTIFICATION: By my signature hereon I certify that all information provided in connection with this application is complete, true, correct to the best of my knowledge and belief; and I endorse the above named student with my personal recommendation that he/she be considered as the recipient of the aforementioned scholarship ..

Signature: _____ DATE: _____