

2010 Parris Island Officers' Spouses' Club Scholarship Form for Spouses

The Officers' Spouses' Club of Parris Island will award scholarships to qualified Spouses. Scholarships will be awarded for academic excellence and merit. Scholarships will be awarded to those spouses seeking education in undergraduate, accredited two- or four-year colleges/universities. This scholarship is a one-time only status for spouses.

To qualify:

1. Be a spouse of an active duty U.S. Military personnel attached to Marine Corps Depot Parris Island, Naval Hospital Beaufort, or MCAS Beaufort ,or
2. Be a dependent spouse of a retired or deceased military personnel residing in the Beaufort area, and
3. **Not** be a recipient of a full tuition scholarship to include an appointment to a military service academy, or a full ROTC program scholarship

Application Procedure

1. Complete the applicant's portion of the form and sign the application.
2. Submit two (2) letters of recommendation.
3. List groups/organizations/committees where you volunteer; how often and what you do as a volunteer.
4. Submit a typed essay (**on a separate sheet of paper without your name on it**), between 300 and 350 words (**using 12 point font, Times New Roman font and double spacing**) on the following topic:

"How will receiving a scholarship from the Parris Island Officers' Spouses Club affect your educational goals?"

Your response to this question will be compared to others applying for this scholarship.

Make certain that you can check off the following items before submitting your application:

- Completed application form
- Letters of recommendation
- Volunteer information
- Essay-one page only please
- All applications must **be postmarked by May 8, 2010**

Remember: Incomplete applications will not be considered!

Send completed application to:

**PIOSC Scholarship Committee
P.O. Box 5134
Parris Island South Carolina 29905**

2010 PARRIS ISLAND OFFICERS' SPOUSES' SCHOLARSHIP APPLICATION

PLEASE TYPE OR PRINT IN BLACK INK

Applicant's Name: _____

Applicant's Social Security Number: _____

Address: _____

Home Telephone Number: _____

Sponsor's Name: _____

Sponsor's Social Security Number: _____

Relationship to Sponsor: _____

Sponsor's Work Address: _____

Active Duty _____ Retired Date _____ Deceased Date _____

List schools to which you have applied or are currently enrolled:

- 1.
- 2.
- 3.

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