



APPLICATION for 2nd Cavalry Association scholarship and/or Professional/Technical grant:

General information:

Application date: _____
Full name: _____
Preferred name: _____
Age: ____ Sex: _____ Marital status: _____
Mailing address: _____

Phone contact number: _____
Email address: _____

Name of qualifying relative: _____

High School

High school graduated from: _____
Previous high school(s) attended (if any): _____
GPA: ____ SAT: ____ ACT: _____

Activities, Organizations, and Leadership positions held while in high school, including varsity athletics:

| Organization | Position held |
|--------------|---------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

(continue separately, as needed)

College Student (only)

College attended: _____ Quarters _____ Semesters _____
Credit hours earned: _____ GPA: _____ Major: _____

College and/or community activities, organizations and leadership positions while in college (Includes ROTC rank/position)

Organization.

Position held

| | |
|--------|-------|
| _____ | _____ |
| _____. | _____ |

(All applicants)

Please write a short (one page or less) essay setting forth why you should receive financial scholarship assistance provided by the 2nd Cavalry Association. Attach separately. Use Microsoft Word format for submission.

Signed: _____ . Date: _____

RETURN APPLICATION TO: Robert McCorkle, 706 Twining Court, Perrysburg, OH 43551, or by:

-Fax to: 419/874-1605 (call first)

-Email to: RS6096@icloud.com