**Monterey Bay Spouses Club (MBSC)**

**Scholarship Application 2024**

**CHECKLIST**

Please check if you have each required document ready and if letter of recommendation is mailed or sent electronically. Include this page in your application package.

Section 1: Applicant Personal Information

Section 2: Academic Information

Section 3: Community Involvement and Work Experience

Section 4: Essay Question

Section 5: Academic History (transcripts)

Section 6: Letter Of Recommendation (  electronic  hard copy)

Privacy Act and Scholarship Application Verification

(application invalid if not signed)

Instructions:

* *The entries on this application form must be complete, accurate, and legible. They must be typed.*
* *Ensure that the information you enter about your sponsor accurately describes the sponsor’s current status. For example, if the sponsor is on active duty, the information must describe their current affiliation, status, etc. If they are retired or deceased, the affiliation, status, etc., must be that which pertained at the time of their retirement or death.*
* *Fill in all information requested. If the answer is “none” or “not applicable”, please make that statement.*
* *Review the form for completeness and all answers for correctness. Use this year’s current form. Do not include resumes or copies of awards. Provide only the information requested.*
* *Do not alter the form except where it’s stated that you can make changes.*
* ***Sign the application form in all appropriate places and ensure that your sponsor does as well****. (If your sponsor is unable to sign the application, please state why they are unable to sign and who is signing in your sponsor’s place).*
* ***Do not send the application via certified or any other signature required mailing methods! There is no one to sign for it!***
* *If you have any questions about the application process or eligibility criteria, please contact the scholarship chairperson at scholarships@mbosc.net.*

**Monterey Bay Spouses Club (MBSC)**

**Scholarship Application 2024**

**SECTION 1: APPLICANT PERSONAL INFORMATION**

***Applicant Information***

Name of Applicant:  \_\_\_\_

Date of Birth:  \_\_\_\_

Home Address:  \_\_\_\_

Email:  \_\_\_\_

Phone: Home  \_\_\_\_     Mobile  \_\_\_\_

Dependent Status:  Spouse  Child  Other  \_\_\_\_

Scholarship requested for:

College/University Degree  Graduate or Professional Degree

Trades Certification  Continuing Professional Accreditation

Other  \_\_\_\_

***Sponsor Information***

Sponsor’s Name:  \_\_\_\_

Branch of Service:  \_\_\_\_     Rank:  \_\_\_\_

Please choose sponsor’s status:  Active Duty  Retired

Deceased  Guard/Reserves

Sponsor’s current duty assignment if applicable:  \_\_\_\_

Sponsor’s assignment date and station while on the Monterey Peninsula:

*Date*: from  \_\_\_\_     to  \_\_\_\_

*Station:*  \_\_\_\_

Sponsor’s current address (if different from the applicant):  \_\_\_\_

**SECTION 2: ACADEMIC INFORMATION**

1. Current level of education (just select your last degree)

High School Senior  Associate degree

Graduated high school or equivalent  Bachelor’s degree

Some college, no degree  Post-graduate degree

Other  \_\_\_\_

1. What college, university, or institution will you be attending?

(*High school seniors: Please indicate the schools you have applied/got accepted*)

 \_\_\_\_

1. What degree(s) will you be pursuing?

 \_\_\_\_

1. List all high schools, colleges and/or technical schools attended:

***(Please add or remove boxes if needed)***

|  |
| --- |
| **Past Education** |
| Name of School:  \_\_\_\_  City, State, Country:  \_\_\_\_  Dates Attended: from  \_\_\_\_     to  \_\_\_\_  Degree Attained:  \_\_\_\_ |
| Name of School:  \_\_\_\_  City, State, Country:  \_\_\_\_  Dates Attended: from  \_\_\_\_     to  \_\_\_\_  Degree Attained:  \_\_\_\_ |

**SECTION 3: COMMUNITY INVOLVEMENT AND WORK EXPERIENCE**

List all community involvement, including activities, sports, clubs, arts (including music, literature, film, sculpture, and painting), community groups/projects, religious, organizations, social groups, and memberships:

**Part A:**  You took part as a participant. (Example: You played on a soccer team; were in a school play; were part of the debate club, etc. Please also list if you had any leadership positions as part of your team/club/etc.)

***(Please add or remove boxes if needed)***

|  |
| --- |
| **Part A** |
| Activity:  \_\_\_\_  Position:  \_\_\_\_  Dates: from  \_\_\_\_     to  \_\_\_\_  Number of hours per month:  \_\_\_\_ |
| Activity:  \_\_\_\_  Position:  \_\_\_\_  Dates: from  \_\_\_\_     to  \_\_\_\_  Number of hours per month:  \_\_\_\_ |

**Part B:** Your devoted hours to support as a volunteer. (Example: You volunteered to be a soccer coach; you volunteered as a tutor, etc. Please also list if you had any leadership positions as a volunteer.)

***(Please add or remove boxes if needed)***

|  |
| --- |
| **Part B** |
| Activity:  \_\_\_\_  Position:  \_\_\_\_  Dates: from  \_\_\_\_     to  \_\_\_\_  Number of hours per month:  \_\_\_\_ |
| Activity:  \_\_\_\_  Position:  \_\_\_\_  Dates: from  \_\_\_\_     to  \_\_\_\_  Number of hours per month:  \_\_\_\_ |

**Part C:** List any awards and/or honors for which you have been recognized, including year of receipt.

***(Please add or remove boxes if needed***

|  |
| --- |
| **Part C** |
| Award/Honor:  \_\_\_\_  Giving Institution:  \_\_\_\_  Year received:  \_\_\_\_ |
| Award/Honor:  \_\_\_\_  Giving Institution:  \_\_\_\_  Year received:  \_\_\_\_ |

**Part D:** List any employment/or work experience (paid or unpaid, including stay at home parenting). Please include nature of the work, whether it was full or part time, and approximate date range:

***(Please add or remove boxes if needed)***

|  |
| --- |
| **Part D** |
| Position:  \_\_\_\_  Employer:  \_\_\_\_  Dates: from  \_\_\_\_     to  \_\_\_\_  Paid  Unpaid  Full-time  Part-time  Additional information if applicable  \_\_\_\_ |
| Position:  \_\_\_\_  Employer:  \_\_\_\_  Dates: from  \_\_\_\_     to  \_\_\_\_  Paid  Unpaid  Full-time  Part-time  Additional information if applicable  \_\_\_\_ |

**SECTION 4: ESSAY QUESTION**

Please answer **ONE (1)** of the following questions in a **TYPED** 400-500-word essay: (attach to packet)

1. As a military dependent, how have you turned the challenges (moving, deployments, no close-by extended family) of the military lifestyle into opportunities for your education?
2. *Praestantia Per Scientiam* “Excellence through Knowledge” is the motto of the Naval Postgraduate School. How will this scholarship help you achieve that goal?
3. Military dependents are resilient, and you never know how strong they are until they face adversity. Please describe a time when you discovered some unknown strength.
4. What do you think are the "superpowers" you have developed as the dependent of a service member that contribute to your success in high school, both in and outside of the classroom?

**SECTION 5: ACADEMIC HISTORY**

Please provide the most recent academic transcripts.

*High School Seniors:* Official transcript of grades through mid-term of this academic year is mandatory.

*College/University Students:* Official transcript through mid-term of this academic year is mandatory.

*Graduates:* Official graduate transcript from the highest degree institution is mandatory.

*If unable to provide transcripts, please attach a short statement of your academic history.*

**SECTION 6: LETTER OF RECOMMENDATION**

Please provide one (1) signed letter of recommendation from one of your employers, teachers/professors, counselors, principals, coaches, community group leaders, or volunteer coordinators etc (cannot be relative). Letter should include examples of academic/work and personal achievements that serve to illustrate both your character and your fitness to receive the MBSC scholarship. Letters must include an address and phone number at which the person writing the letter can be reached. The writer must identify the applicant by name.

Letters may be provided along with your hard copy application (in a sealed envelope) or scanned and provided electronically to [scholarships@mbosc.net](mailto:scholarships@mbosc.net) directly by the signatory.

**Monterey Bay Spouses Club (MBSC)**

**2024 Scholarship Application**

***Privacy Act and Scholarship Application Verification***

*I acknowledge reading all the instructions pertaining to this application and fully understand the requirements stated therein. By signing below, I am verifying that the information I have provided to the Monterey Bay Spouses Club Scholarship Committee is accurate to the best of my knowledge and I consent freely to allow the Scholarship Committee to confirm all the information included therein.*

*If selected, I agree to allow use of my name and picture for purpose of publicity in media outlets, including print, news, magazines, radio, TV, online, scrapbooks, and onto the Monterey Bay Spouses Club (MBSC) web page and social media accounts.*

*In addition, I understand the primary purpose of this information submitted is for the Monterey Bay Spouses Club Scholarship Committee to judge my application for possible award of a 2024 scholarship. Disclosure of all information is voluntary; however, failure to provide this information may prevent the Monterey Bay Spouses Club Scholarship Committee and its designated judges from properly judging my application/packet and thus determining my eligibility for the award of a scholarship. All submitted information is used solely for the purpose of the award of a Monterey Bay Spouses Club Scholarship Committee scholarship and will not be used for any other purpose.*

*I acknowledge all information provided is truthful and factual to the best of my knowledge and I have completed the application of my own accord.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Sponsor Date

(Or other parent/guardian if sponsor if unable to sign.)