KATRINA TUBBS-GRIMES Scholarship
Enlisted Association of the National Guard of Tennessee Auxiliary
Academic Scholarship Application
(To be completed by all applicants)

	(Last 4 digits of SSN of Sponsor)	(Date)
1	(Name and address of Applicant)	
2	(Name, Address, and Telephone Number of Sponsor)	
	Furrent status of Applicant (check one): High School [ ] College [ ] Business Technical School [ ] Working [ ] if in school or college, name the school or college and grade or term.	
4. Li	st recent student activities in which you have participated:	
5. Li	st offices to which you have been elected in any organization:	
6. Li	st honors (scholastic, athletic, citizenship, etc.) which have been awarded to you:	·
7. Sc	hool or college you wish to attend and why (use additional sheet if necessary): _	
8. N	umber of school age children in family: Elementary [ ] High School [ ] Colle	ege [ ]
9. Ha	we you received any other scholarships to date? If so, specify:	
f addi	tional space is needed to answer questions, you may use a separate sheet and atta	ch.
have	answered the above questions to the best of my knowledge and belief.	
	(Signature of Applicant) (Signature	of Sponsor)

See next page for instructions on completing this application.

All applications will be sent CERTIFIED RETURN RECEIPT MAIL, postmarked no later than 15 days prior to start of conference and accompanied by:

- a) A recent snapshot of applicant.
- b) A Xeroxed copy of Sponsor's membership card under which this application is submitted.
- c) A copy of applicant's school transcript.
- d) A letter from applicant with specific facts as to desire to continue his/her education and why financial assistance is required.
- e) Letter of recommendation verifying this application and giving general personal traits.
- f) Letter of academic reference (principal, dean, or counselor).
- g) Each student selected shall keep the committee informed as to his or her academic progress.

COMPLETE AND MAIL TO: Lolita Horton

4335 Fiske Valley Dr. Bartlett, TN 38135