

2020 CSM TIMOTHY BOLYARD SCHOLARSHIP APPLICATION

Please provide the required information requested in the application as accurately and completely as possible. Failure to complete all required information will result in possible disqualification.

Student's Information - To Be Completed By Student

Student's Full Name: _____
Last
First
Middle Initial

Address: _____
Street
City
State
Zip Code

Email Address: _____

Daytime Phone Number: _____ Evening Phone Number: _____

Mobile Phone Number: _____ Date of Birth: _____

Military Member/Dependent High School Student Current College/Trade Student Other

Present Station and Address (military only): _____

Mother/Guardian's Name: _____

Address: _____

Email Address: _____

Father/Guardian's Name: _____

Address: _____

Email Address: _____

School Information

Name of High School and Graduation Date (if applicable):

School _____

Date: _____

If Enrolled Post High School, Name of School _____

Post High School Grade Point Average: _____ Class Year: _____ (Sophomore, Junior) _____

Number of students in graduation class: _____ Your class rank: _____

Address: _____
Street City State Zip Code

Other Schools Attended and/or Degrees Received _____

List Colleges/University/Vocational Technical School(s) to Which YOU Have Applied

_____ Accepted [] Yes [] No

_____ Accepted [] Yes [] No

If Enrolled Post High School, Name of School _____

Post High School Grade Point Average: _____ Class Year: _____ (Sophomore, Junior) _____

Address: _____
Street City State Zip Code

Other Schools Attended and/or Degrees Received _____

List Colleges/University/Vocational Technical School(s) to Which YOU Have Applied

_____ Accepted [] Yes [] No

_____ Accepted [] Yes [] No

Student Essay on the Army Values: <https://www.army.mil/values/>

This Scholarship is named after **CSM Timothy A. Bolyard**, who gave his life in service to our nation. CSM Bolyard lived by the Army Values of Loyalty, Duty, Respect, Selfless Service, Honor, Integrity, and Personal Courage. In your own words, explain how this scholarship will help you to achieve one or more of these values in service to the community and to our nation.



Academic Achievement

Grade Point Average (GPA): _____ [] ACT [] SAT Score: _____

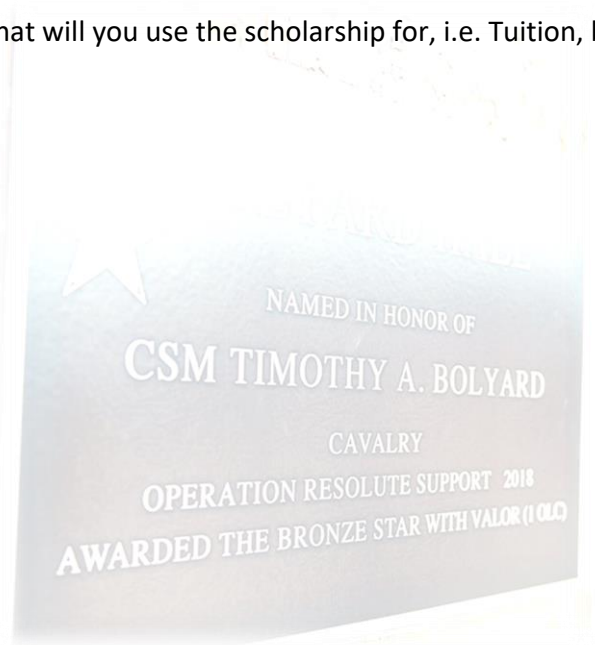
Career Interest(s), Your Field of Study, and Why you chose it (Answer limited to space provided):



Academic Achievements and Recognitions (Discuss grades, test scores, any awards, commendations etc. such as National Honor Society that you have received):

Scholarship Information

Scholarship Purpose (What will you use the scholarship for, i.e. Tuition, books, living expenses)?



What other means are you using to pay for College/University/VoTech? (i.e. Student Loans, Parents, Other Scholarships, ROTC etc)?

If selected, where does a scholarship check get mailed to? (at College/University/VoTech)

Name, phone number, and email address: (normally Bursar's office)

Address:

Street *City* *State* *Zip Code*

What office name should the scholarship check to be addressed to (i.e. Registrar, Admissions, etc)?

Student Certification Section

I certify that all information provided as part of this application is true and correct to the best of my knowledge. I give my consent to the sponsoring organization considering this application to use the information provided herein for the purpose of scholarship consideration.

I also agree that, in the event I am awarded this scholarship, the Thunderbolt Chapter has permission to use my name, picture, and scholarship award information in USCAA publications and promotions.

Signature of Student: _____ Date: _____

Full Name of Thunderbolt Chapter Member: _____

U.S. Cavalry and Armor Association Member ID#: _____

Relationship to Applicant: _____

**Signature of Guardian: _____ Date: _____

*** Signature is only required if student is age 18 or below*

Completed by Selection Committee (Thunderbolt Chapter)

Members of Selection Committee:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Scholarship Approved/Disapproved (Circle One)

Scholarship is/was: ___ needs based ___ merit based ___ combination of both

Signature of Chapter President: _____ Date: _____

(President Signature Block)