



Fort Benning

Sergeants Major Association

FORT BENNING SERGEANTS MAJOR ASSOCIATION
P.O. BOX 53592, FORT BENNING, GEORGIA 31995

FORT BENNING SERGEANTS MAJOR ASSOCIATION CSM EDDIE L. ROBERTS MEMORIAL SCHOLARSHIP APPLICATION

Indicate Category, if applicable: **Parent KIA** ___ **Parent WIA** ___

Applicant Full Name: _____

SSN: _____ DOB: _____

Address: _____ City: _____

State: _____

ZIP: _____

Phone: (home) _____ (Cell) _____

Email: _____

High School, college/university, tech or trade school attending: _____

Graduation Year: _____

Declared or intended Major: _____

Certified Standard Test Scores: SAT _____ ACT _____ Other _____

Most recent year High School or College/University/School

GPA/Grades: _____

Provide each of the following as attachments to this application: (Full Name on each page)

Attachment 1: Describe your ambitions and goals. (May include your chosen field of study)

Attachment 2: Two persons in your chosen field of study that have most influenced you and why.

(Limit attachments to 1 or 2 narratives and 250 words)

Attachment 3: Activities, training, and awards received in the past four (4) years.

Attachment 4: Two (2) letters of recommendation: at least one from a teacher or professor. (No relatives please)

Attachment 5: Official High School transcript and/or current College/Univ/School GPA/Grades
(*Note: Previous scholarship recipients who are reapplying need send only a letter of recommendation from a professor/teacher and a current copy of grade transcripts supplied by the educational institution.*)

Parent or Guardian Affidavit:

I affirm that the Scholarship Applicant _____ is a natural, adopted, or step-child of a service member who is currently serving or who has served in the United States military. (*Note: Parent must provide proof of service in the form of orders, awards, etc*)

Name of Parent or Guardian (Please Print): _____

Signature: _____ Date: _____



RETURN THIS APPLICATION AND ANY ATTACHMENTS TO:

Email: benning.csm.sgm.assn@gmail.com

Mail: Fort Benning Sergeants Major Association

ATTN: Committee Chair, CSM Eddie L. Roberts Memorial Scholarship Committee

PO Box 53592

Fort Benning, GA 31995

Note: Applications must be postmarked by April 15th, 2021.

Attachment 1

Describe your ambitions and Goals (May include your chosen field of study)



Attachment 2

*Two persons in your chosen field that have most influenced you and why.
(Limit to 250 words)*



Attachment 3
Activities, training, and awards in the past four (4) years
(Copies of certificates are recommended)

Activities:

Training:

Awards:



Attachment 4

Two (2) Letters of recommendation: at least one from a teacher

Subject: Letter of Recommendation for _____

Text:

Title: _____

Name (Please Print): _____

Signature: _____

Contact email: _____

Phone: _____