

# Gamewardens of Viet Nam Association, Inc.

### **Revised: September 2022**

### (Not affiliated with any state or federal agency that employs Game Wardens)

## Scholarship Application Form

Gamewardens Association has three scholarships: Gamewardens Scholarship (2) and YNC John Williams Scholarship (1). This application covers all Gamewardens Association, Inc. scholarships. Qualified applicants will be a child, stepchild, grandchild or great grandchild of a life member of the Gamewardens of Viet Nam Association. Life members will have served with Task Force-116 in the Republic of Viet Nam or as Special Warfare Combatant Crewmen serving with Special Warfare Boat units.

Application Deadline: Must be post marked or received via e-mail no later than July 15 of the current year

**<u>Repeat Applicants:</u>** You may submit subsequent applications if you were not successful in previous attempts. If you are a successful recipient, you may submit an application again. However, successive successful applicants will be awarded only if there are two or less applicants in the year that you resubmit per Board of Directors - 2016

#### SPONSOR INFORMATION

<b>N</b> AME: Last	First	M	Middle		
Phone:	e-mail address:				
Is the sponsor a currer	nt member? Yes / No - Relation to Applicant: $\_$		т	F-116 or SWCC	
APPLICANT INFORM	ATION (Is this your first application? Yes/No	o - Are you a previ	ious recij	oient? Yes/No)	
NAME: Last	First	Mid	Middle		
Date of Birth:	Sex: _M _F TEL: Home:	ALT:	ALT:		
Permanent Address: _	Street Address or P O Box	City	State	Zip Code	
E-mail address:					
Please send complete	d application via e-mail or regular mail to:				
Gamewarden Scholars ATTN: Ken Delfino P.O.Box 690 Keystone, SD 57751-0					

e-mail: <u>scholarship@tf116.org</u>

COLLEGE/UNIVER	RSITY INFORM	ATION: Name						
Academic Year:	cademic Year: Have you been accepted? Yes/No - Student ID							
Mailing Address for	college/univers	ity where we will be	sending the scholarship	:				
Street addr	ess or P. O. Bo	x	City	State	Zip Code			
Name of person to	whom we will se	end the scholarship:						
e-mail address:	e-mail address:Tel:Tel:							
Academic Backgr	ound:							
Name of high school	ol attending/atte	nded:						
Address: Street			City		State			
Dates Attended:		GPA:	//	(Weigł	nted)			
High School Couns	gh School Counselor: H. S. Phone Number:							
SAT: Math	_ Reading	Writing/Languag	ge Combined _		_			
ACT: English	Math	Reading	Science Reasoning _	Co	mposite			
* Leadership Posit	<u>tions – Studen</u>	Body Officer/Class	s Officer/Team Captain	/Club Offic	cer/Mentoring/Job:			
* Community Service Involvement with Church/Youth Group/Service Organizations:								
For above two * categories, use additional sheet if necessary and how many years in each position								
<u>Personal Essay:</u> Please write a personal essay explaining the need for the scholarship, what you intend to do with your degree and whatever else you would like us to know about yourself.								
I declare that this e knowledge, correct		work and that all the	information in my applic	ation is, to	the best of my			
Applicant's signatu	re:			Date: _				

Note: If your school has forms that need to accompany the check from us to enable the deposit into your school account, such forms MUST be included with the submission of your application.