



Buc Days Military Dependent Scholarship Scholarship Application 2016-2017

Scholarship applicants, please complete this form including your signature. Submit this along with the other requested documents back to the Buccaneer Commission (BC) Scholarship Fund committee by the priority deadline: **Applications must be received by end of day or postmarked by April 1, 2016.**

*******Selected Scholars will receive \$500 towards the Fall 2016 Semester.*******

TO BE COMPLETED BY THE STUDENT.

Student's Name: _____ Phone # _____

High school currently attending _____ City _____

Scheduled to graduate May of 2015? _____ Other? _____

Have you been accepted to a college/ University for the 2016-2017 year? _____

If yes, what is the name and location of the school? _____

Please initial each section below

I understand that:

____ If I am chosen to receive this BC award, the award check will be provided directly to the university financial office to be applied to tuition, books or academic fees only.

____ The award of this scholarship, is contingent on providing proof of enrollment as a full-time student at an accredited University.

____ If selected, I will provide proof of military dependent status. Examples; a current dependent military ID or copy of sponsors DEERS form.

____ The Buccaneer Commission, Inc., reserves the right to withdraw the scholarship in the event I fail to conduct myself in a manner acceptable to the values held by the Buccaneer Commission, Inc. or if I fail to meet the requirements out lined above.

Student's Signature: _____ Date: _____

HIGH SCHOOL EDUCATION INFORMATION

High School Name, County _____

Sponsor's Branch of Service _____

Relationship to Military Sponsor _____

Active Duty _____ Years of Service? _____ Estimated Separation Date _____

Retired _____ Years of Service? _____ Separation Date? _____

HIGH SCHOOL EDUCATION INFORMATION, CONTINUED

Did you participate in extracurricular activities? yes no

List Extracurricular Activities:

List Awards and Special Skills:

EMPLOYMENT

Have you been or are you currently employed? yes no

If yes, please list employment you held, starting with the most recent.

REQUIRED ESSAY

Describe what it means to you be the dependent of a member of the United States Armed Services. Use this section to describe to the Scholarship Committee why you deserve or need a scholarship and any extenuating circumstances the committee members should consider in making scholarship decisions. Your essay is confidential and will not be released without your consent. Details regarding your future career goals should be included.

Instructions: Maximum length 4,000 characters. Please type your answer on a separate piece of paper and staple it to this application.

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Scholarship Application 2016-2017

SCHOLARSHIP SUBMISSION TO BUCCANEER COMMISSION

Buccaneer Commission
P.O. BOX 30404
Corpus Christi TX 78463-0404

The Buccaneer Commission's mission is to provide South Texas fantastic entertainment as well as support the educational opportunities of area students. Each year numerous scholarships are granted by this non-profit organization. Please visit www.bucdays.com for more information.