

Combat Helicopter Pilots Association

2016-2017 Academic Year Goldie Fund Scholarship Application



ABOUT THE SCHOLARSHIP PROGRAM

Each academic year, the CHPA's Goldie Fund Scholarship Committee convenes to evaluate scholarship applications. Both high school seniors and students already attending post-secondary schooling are eligible to apply. Scholarships range from \$1,000 - \$1,500 for the ensuing academic year.

TIPS FOR A SUCCESSFUL SCHOLARSHIP APPLICATION

- 1. Read the entire application before you begin.
- 2. Fill out <u>all</u> information requested as the review committee will not consider incomplete applications.
- 3. Return a complete copy of the application form to the CHPA Goldie Fund Scholarship Committee by the deadline.
- 4. Thoroughly proofread your essay and ask a teacher/parent to review it for you.
- 5. Request official copies of your transcripts as soon as possible.
- 6. Include a legible e-mail address. CHPA contacts all students electronically as well as announces scholarship recipients through e-mail, so it is essential that you include a valid e-mail address.

SEND COMPLETED APPLICATION TO:

CHPA GOLDIE FUND SCHOLARSHIP COMMITTEE c/o Milan Tesanovich 14011 Colville Circle Carmel, IN 46033 <u>mtesanovich@chpa-us.org</u>

Applications will be accepted by mail or email only. Applications CANNOT be faxed.



Application Must Be <u>POSTMARKED</u> No Later Than June 15, 2016

RULES

The following rules apply to this scholarship program:

- 1. **The Application Must be Complete**: All applications must be complete, accurate, legible, and printed or written in black ink.
- 2. **Qualifying Status**: An individual may apply for a CHPA Goldie Fund Scholarship if the applicant is a current member of the CHPA. (See the definition of a "current member" in the *Definitions* section of this application.)

In the event the applicant does not qualify to be a member of the CHPA, the individual may apply for a CHPA Goldie Fund Scholarship through a "sponsor" who is a current member of the CHPA. (See the definition of a "sponsor" in the *Definitions* section of this application.)

If the applicant is applying through a "sponsor," the applicant must be an immediate family member of the sponsor. (See the definition of an "immediate family member" in the *Definitions* section of this application.)

In the event the sponsor is deceased, the sponsor must have been a CHPA member "in good standing" at time of death, or would have qualified for membership at the time of death.

- 3. Attendance at an Accredited Post-Secondary Education Institution: A CHPA Goldie Fund Scholarship recipient must be attending an accredited post-secondary educational institution full time.
- 4. Academic Achievement While Receiving a CHPA Goldie Fund Scholarship: A CHPA Goldie Fund Scholarship recipient must attain and maintain at least a 2.25/4.0 grade point average while attending an accredited post-secondary educational institution.
- 5. **Monetary Need**: While household income, often considered when determining "monetary need," is not a factor in qualifying for a CHPA Goldie Fund Scholarship, the applicant will not qualify to receive a CHPA Goldie Fund Scholarship if the applicant is already receiving scholarship awards or grants that fully pay tuition for the academic term (semester) for which the CHPA Goldie Fund Scholarship is intended.
- 6. **Required Documents**: <u>ALL Applicants</u> will be required to submit the following documents in support of their applications:
 - An essay addressing why you want to go to college and what you intend to accomplish with your degree. (See the *Instructions* section of this application for more information about the essay requirement).
 - A school and community activities sheet listing your extracurricular school and community activities, and awards. (See the *Instructions* section of this application for more information about the School and Community Activities Sheet requirement).
 - Academic Achievement Documentation: Please use the Transcript Release Form located in this Application packet to request these documents. If you academic institution requires a different form, then use that form. (See the *Instructions* section of this application for more information about the Academic Achievement Documentation requirement).
 - Character Recommendations: Provide at least two recommendations, one academic (the academic recommendation should be from a teacher, professor, dean, academic mentor, faculty advisor, *etc.*) and one community (the community recommendation should be from a pastor/priest/rabbi, overseer of volunteer work, beneficiary of community work you may have done, scout master, employer someone within your community who can speak to your character and contributions outside of academia). Applicant may provide more if desired. Please use the Academic Recommendation and Community Recommendation forms, respectively.
 - Copy and use the forms provided in this application packet to request release of your transcripts and obtain the requested character recommendations. It is both wise and polite to supply a preaddressed stamped envelope to the person you are asking to provide your recommendation. Fill in your name on the recommendation and follow up to make sure your recommendations and school transcripts have been mailed prior to midnight on June 15 2016.

- Submit one complete set of all documents. The academic achievement documents and the character recommendations may be mailed in with your application package or directly from the reporting source.
- 7. The CHPA Goldie Fund Scholarship Committee must receive copies of all documents required to be submitted in support of the application, [for example official or certified academic documents (*i.e.* high school and/or college transcripts and test scores), your essay, your school and community activities sheet, two recommendations, proof of active military service, proof of discharge other than dishonorable, *etc.*], by the deadline date shown on the cover page of this application in order for the CHPA to consider your application for a CHPA Goldie Fund Scholarship.
- 8. The CHPA will acknowledge receipt of your application if you have enclosed a self-addressed, stamped **postcard** (not an envelope) that states: "CHPA Goldie Fund Scholarship application has been received _____." We will date it and mail it back to you.
- 9. Scholarship applicants are notified of their selection or non-selection via e-mail in early September.
- 10. You agree that if you are selected to receive a CHPA Goldie Fund Scholarship, your photo and excerpts from your essay may be used for promotional materials.
- 11. **Signature and Verification**: The applicant (and a sponsor if the applicant requires a sponsor) must sign the application form and verify that the information contained therein is complete and accurate.
- 12. Through your signature on the application, and in consideration of the opportunity to participate in the scholarship application process, you, the applicant (and sponsor, where applicable), hereby grant the right for any information to be independently verified and waive any and all liability or appeal for the process and the selections made, including not being selected to receive a scholarship.

DEFINITIONS

The following definitions apply to this scholarship program:

- 1. **Accredited** is defined for purposes of this application as an institution of higher learning that meets the standards of quality by which one of the Commissions recognized by the U.S. Department of Education determines whether a higher education institution merits accreditation or reaffirmation of accreditation. A list of accredited higher learning institutions can be found through this website: <u>http://ope.ed.gov/accreditation/</u>.
- 2. **Current CHPA Member** is defined as a pilot or flight-crew member who has met all of the eligibility requirements to be a voting member of the CHPA and is dues current.
- 3. **Immediate Family** is defined as the spouse; biological child; adoptive child; biological grandchild; adoptive grandchild, biological great-grandchild; or adoptive great-grandchild of a current CHPA member.
- 4. Post-Secondary Education Institution or Institution of Higher Education is a school that: (1) awards a bachelor's degree or offers not less than a 2 year program that provides credit towards a degree; or, (2) provides not less than 1 year of training towards gainful employment; or, (3) is a vocational program that provides training for gainful employment and has been in existence for at least two years; and meets all three of the following criteria: (1) admits as regular students only persons with a high school diploma or equivalent; or admits as regular students persons who are beyond the age of compulsory school attendance; (2) is organized and recognized as a Public, Private, or Non-Profit legal entity; (3) is accredited; and (4) is authorized to operate in each state in which a campus is located, or is approved to offer on-line courses in the jurisdiction in which the student resides.
- 5. **Sponsor** is defined as a current CHPA member "in good standing," or if the sponsor is deceased, the sponsor was a current CHPA member "in good standing" at time of death, or would have qualified for membership at the time of death.

INSTRUCTIONS

- 1. Read all instructions carefully. Review and understand all instructions before mailing.
- 2. **Essay Requirement**: **Required of** <u>ALL Applicants</u>. The essay should be should be typed or printed neatly in black ink and must be legible to the adjudicator. The essay should address why you want to go to college and what you intend to accomplish with your degree.

Consider the essay your résumé. Sell yourself to the adjudicator as you would to a future employer. Cite life experiences, career objectives and what motivates you to select these objectives.

The essay should be: (1) no less than two and no more than three pages in length; (2) double-spaced; (3) 12-point Arial font; and (4) one-inch margins (top, bottom, and both sides).

- 3. School and Community Activities Sheet: Required of ALL Applicants.
 - Activities: On a separate sheet of paper list your extracurricular school and community activities, and awards. If you have no extracurricular activities or awards please insert a page stating that.
 - Academic Documentation: Required of <u>ALL Applicants</u>. Please use the Transcript Release Form contained in this Application Packet.
 - Current High School Students: Provide official high school transcript and SAT/ ACT scores.
 - **Current Undergraduate Students**: Provide an official school transcript for the years you have already completed.
 - **Graduate Students**: Provide an official school transcripts from your undergraduate and your post-graduate years.
- 4. **Character Recommendations**: Required of <u>ALL Applicants</u>. Provide at least two recommendations, one academic and one community. Applicant may provide more if desired.
 - Academic recommendation: (teacher, professor, dean, academic mentor, faculty advisor, *etc.*). Please use the Academic Recommendation form.
 - Community recommendation: (pastor/priest/rabbi, overseer of volunteer work, beneficiary of community work you may have done, scout master, employer – someone within your community who can speak to your character and contributions outside of academia). Please use the Community Recommendation form.
- 5. **ALL Applicants**: Copy and use the forms provided herein to request release of your transcripts and obtain the requested character recommendations. It is both wise and polite to supply a pre-addressed stamped envelope to the person you are asking to provide your recommendation. Fill in your name on the recommendation and follow up to make sure your recommendations and school transcripts have been mailed prior to midnight on July 15, 2016.
- 6. **ALL Applicants**: Submit one complete set of documents: application, essay, and activity sheet. Transcripts and recommendations may be mailed in with applicant package or directly from reporting source.
- 7. **ALL Applicants**: Must be registered as a full time student in an institution of higher education.
- 8. Mail or email Application To:

CHPA GOLDIE FUND SCHOLARSHIP COMMITTEE c/o Milan Tesanovich 14011 Colville Circle Carmel, IN 46033 <u>mtesanovich@chpa-us.org</u>

APPLICANT INFORMATION							
Applicant Name: Last		First		Middle		Mai	den (if applicable)
Home Street Address:							
Home City:	Home City:			Home State:			Home ZIP:
School Street Address:							
School City:			School State:		School ZIP:		
High School you graduated t	rom:						
Undergraduate College(s) at	ttending or g	graduated fro	om. List deg	ree(s) attained:			
Graduate Schools attending	or graduate	ed from. List	degree(s) at	tained:			
Home Phone Number:	mber: Cell Phone Number: School F		hone Number Email Address as		s of 6/1/15:		
Gender:	U.S. Citizen: male Yes No		Date of	Date of Birth: Ma		Marital Status:	
Is the Applicant (or Sponsor, if applicable) a current CHPA member: Yes No If the Applicant or Sponsor is a current CHPA member, answer the following. Please Check <u>All</u> That Apply:							
Applicant's or Sponsor's CHF	PA Member	Number:					
Applicant's/Sponsor's Branch	n: 🗌 Ai	r Force	Army	Marines	Coast G	Guard	🗌 Navy
Applicant/Sponsor is currentl	y: 🗌 Ad	ctive Duty	Retired	Reserve	🗌 Nat'l G	uard	Ueteran
Applicant/Sponsor is Serving	/Served as:	[Regular	Reserve	🗌 Nat'l Gu	uard	
Applicant's/Sponsor's Service Type: Commissioned Only Commissioned & Enlisted Only				Enlisted Only			
I have read and understand the Rules on Pages 2 and 3 and the Instructions on Page 5 and certify that the information herein is correct to the best of my knowledge.							
Applicant's Signature (parent if applicant is a minor):			Date:				
Sponsor's Signature (if appli	cable):				Da	ate:	

APPLICANT'S HOUSEHOLD FINANCIAL INFORMATION							
Name of Head of Household:			Hc	Home Telephone:		Work Telephone:	
Relationship to Applicant:				Ce	Cellular Telephone:		Email address:
Street Address: (if di	fferent from App	licant):	1				
City:			State:		ZIP:		
Number of persons in Household:	Amount of cash assets and monthly income:	Checking:	: Savings:		Parent(s):	Veterans Benefits:	Other (describe):
I have read and understand the Rules on Pages 2 and 3 and the Instructions on Page 5 and certify that the information herein is correct to the best of my knowledge.							
Applicant's Signatur	re (parent if app	licant is a min	ıor):			Dat	e:

APPLICANT'S FINANCIAL AID / SCHOLARSHIP / GRANT INFORMATION				
List Amount of Costs to Attend School (may be estimated) for 2016-2017 Academic Year				
Tuition: \$	Room and Board: \$		Books & Other Fees: \$	
Educational Resources Available of	Awarded for Next S	chool Year (use a	additional sheet if necessary)	
Veterans Education Benefits: \$		Other: \$ Source(s):		
Loan(s): \$ Source(s):		Scholarship(s): \$ Source(s):		
Grant(s): \$ Source(s):		Total Funds Available for Education: \$		
Additional Comments: The applicant, bring to the attention of the scholarshi			becific circumstance that they desire to atus described above.	
I have read and understand the Rules on Page 2 and 3 and the Instructions on Page 5 and certify that the information herein is correct to the best of my knowledge.				
Applicant's Signature (parent if applica	ant is a minor):		Date:	

SCHOOL & COMMUNITY EXTRACURRICULAR ACTIVITIES AND AWARDS

On a separate sheet of paper, please list school, community extracurricular activities, and awards. (See Rules on Page 2 and Instructions on Page 5)

APPLICANT'S EDUCATION INFORMATION			
Name High School Currently Attending or Graduated From:	Dates of Attendance:	Graduation Date:	
Address of High School Currently Attending or Graduated From	m:		
Name of College Where You Intend to Matriculate:			
Address of College Where You Intend to Matriculate:			
Name of Previous College Attended:	Date(s) of Attendance:	Graduation Date:	
Address of Previous College Attended:			
	[
Name of Previous College Attended:	Date(s) of Attendance:	Graduation Date:	
Address of Previous College Attended:			
I have read and understand the Rules on Pages 2 and 3 and the Instructions on Page 5 and certify that the			
information herein is correct to the best of my knowledge.			
Applicant's Signature (parent if applicant is a minor):		Date:	

APPLICANT'S WORK EXPERIENCE			
Employer's Name:	Dates Employed:	Description of Job:	
Important – We must receive this completed application and one complete set of documents (essay, activity sheet, transcripts, and recommendations) with a postmarked date no later than the date shown on the cover page of this application in order to consider any application for a CHPA Goldie Fund Scholarship.			
I have read and understand the Rules on Pages 2 and 3 and the Instructions on Page 5 and certify that the information herein is correct to the best of my knowledge.			
Applicant's Signature (parent if applicant is a	minor):	Date:	

ACADEMIC RECOMMENDATION FOR APPLICANT OF CHPA GOLDIE FUND SCHOLARSHIP

Instructions to the person making the recommendation: Please answer the following questions as best you can. If necessary, use additional sheets of paper. When done, please seal the completed recommendation in an envelope and sign your name across the sealed flap on the back. Send completed recommendations to:

CHPA GOLDIE FUND SCHOLARSHIP COMMITTEE ATTN: MILAN D. TESANOVICH 10411 COLVILLE CIRCLE CARMEL, IN 46033

	Recommendation for:	
	Recommendation by:	
	Title/Position:	
	Phone Number:	
	Email:	
	Relationship to Applicant:	
Question #1:	Describe the capacity in which you've known the applic	ant.
Answer:		
Question #2:	What accomplishments or character qualities do you scholarship award?	feel make him/her worthy of a
Answer:		
Question #3:	How does the applicant compare to peers?	
Answer:		
Question #4:	Are there any particular challenges or leadership qual warrant your special recommendation?	ities the applicant has met that
Answer:		
Question #5:	What other information about this applicant shoul consider in making its decision?	d the scholarship committee
Answer:		
I certify that	the information herein is correct to the best of my knowle	dge.
Recommende	r's Sianature:	Date:

COMMUNITY RECOMMENDATION FOR APPLICANT OF CHPA GOLDIE FUND SCHOLARSHIP

Instructions to the person making the recommendation: Please answer the following questions as best you can. If necessary, use additional sheets of paper. When done, please seal the completed recommendation in an envelope and sign your name across the sealed flap on the back. Send completed recommendations to:

CHPA GOLDIE FUND SCHOLARSHIP COMMITTEE ATTN: MILAN D. TESANOVICH 10411 COLVILLE CIRCLE CARMEL, IN 46033

Recommendation for (applicant's name):	
Recommendation by (name):	
Title/Position:	
Phone Number:	
Email:	
Relationship to Applicant:	

Question #1: Describe the capacity in which you've known the applicant.

Answer:

Question #2: What accomplishments or character qualities do you feel make him/her worthy of a scholarship award?

Answer:

Question #3: How does the applicant compare to peers?

Answer:

Question #4: Are there any particular challenges or leadership qualities the applicant has met that warrant your special recommendation?

Answer:

Question #5: What other information about this applicant should the scholarship committee consider in making its decision?

Answer:

I certify that the information herein is correct to the best of my knowledge.

Recommender's Signature:

Date:

TRANSCRIPT REQUEST AND RELEASE FORM

Applicant: Submit This Form to Your High School or College Administrative Office

Official Privacy Act Statement

The purpose of this request is to obtain academic information about the scholarship applicant named herein. The information will be used by the scholarship sponsoring organization to evaluate the applicant's academic achievement and character. The applicant must authorize release of the requested transcript data.

The high school/college named below has my express permission to release the information requested herein to the scholarship sponsor indicated below:

Mail to:

CHPA GOLDIE FUND SCHOLARSHIP COMMITTEE c/o Milan Tesanovich 14011 Colville Circle Carmel, IN 46033 mtesanovich@chpa-us.org

Date:

Student's/Applicant's Signature (parent if applicant is a minor):

INSTRUCTIONS FOR HIGH SCHOOL/COLLEGE OFFICIALS

Academic officials are requested to complete this form. Please attach a copy of the student's official transcript, including grades achieved. Please provide SAT and/or ACT scores and forward to the scholarship sponsor indicated above by mail or email.

Provide the following information even if provided in transcript. Please use the 4.0 grading scale.

STUDENT'S NAME: (LAST, FIRST, MIDDLE)

Name of High School/College:

Address of High School/College:

Student's Dates of Attendance:

Cumulative GPA: (4.0 Scale):

SAT/Writing:

High School Rank:

SAT/Reading: High School Class Size: ACT Composite:

Remarks by that may be beneficial to the Scholarship Adjudicator (use additional sheets if necessary).

I certify that the information herein is correct to the best of my knowledge.

SAT/Math:

School Official's Name:	Title:
School Official's Signature	Date:

Please Remember to Submit Official Transcripts