



OAKFIELD VETERAN of FOREIGN WARS SCHOLARSHIP FORM

Post 8092

Name

Phone Number

Email

Street Address

City, State, Zip

Gender

Father Name / Guardian

Phone Number

Occupation

Street Address

Same as above

City, State, Zip

Mother Name/Guardian 2

Phone Number

Occupation

Street Address

Same as above

City, State, Zip



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1. Are any of the following members in your family veterans or on active duty? Please include their names. If Other, please indicate relationship.

- Siblings Parents Grandparents Great Grandparents Other

2. List all the sports and years you completed the entire season throughout your high school career.

3. What extracurricular activities have you participated in, both in and out of school, to include years of participation?

4. Describe your work history beginning with the most recent first, to include the approximate hours per week.

5. Describe your volunteer history during the last four years to include the approximate hours per week.

6. What is your highest ACT score?

7. List all school/academic awards received.



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[Redacted area]

8. Have you been notified that you are to be awarded any other scholarships or grants? If so, please give the name, date, and amount.

[Redacted area]

9. What is your intended major and/or career? WHY? (In 100 words or less)

[Redacted area]

10. Are you attending a University or a Technical School? Provide full school name? WHY? (In 100 words or less)

[Redacted area]

11. How do you plan to finance your education?

[Redacted area]

12. What do you anticipate will be your schooling cost for this coming year? To include tuition, room & board, books, fees, additional expenses and total.

[Redacted area]

13. Why do you deserve the Oakfield VFW Scholarship? (In 100 words or less)

[Redacted area]