2025 NOSC SCHOLARSHIP APPLICATION (B)
Spouse/Dependents Attending Institutions of Higher Education

Napoli Operational Support Club (NOSC) scholarships are made possible through NOSC sponsored activities and charitable donations as defined in the NOSC By-Laws. The Scholarship Committee reviews submissions, determines applicant eligibility and applies rubrics to the application package. The rubric criteria includes a combination of GPA, advanced courses, extracurricular activities, work experience, volunteer experience and personal essay. Financial need is not factored into award consideration.

The Scholarship Committee is an independent panel of judges comprised of volunteer military spouses of the Naples community. Judges are screened for potential conflict of interest and their dependents are not eligible to apply for a scholarship. **Student identity is maintained anonymous throughout the judging and award determination process.** The only member of the NOSC Governing Board involved in the independent judging process is the Scholarship Chair. Submission of an application does not guarantee receipt of a scholarship.

ELIGIBILITY:

To be eligible for the scholarship you must meet the following criteria:

1. Applicant must be a high school graduate currently living in the Naples, Italy area during the year of application.
2. Spouses and dependents of active duty US military, DoD civilians and US government sponsored contractors with a current US ID card who are serving on one of the US and/or NATO Naples area bases are eligible to apply.
3. Applicant must be applying to or currently enrolled in an accredited trade/technical school, college or university as a student in order to graduate with an Associate of Arts (AA), Associate of Science (AS), Bachelor of Arts (BA), Bachelor of Science (BS) degree or industry certification.
4. Previous NOSC scholarship recipients may not reapply.
5. If an applicant is awarded a NOSC scholarship, the applicant agrees to have their name, college, and photo published for the benefit of NOSC.
6. Applicants will not be eligible if they accept an appointment to any service academy, affiliated preparatory school or any full scholarship to an accredited US post-secondary institution. This includes the GI Bill/Yellow Ribbon program if the tuition and/or fees are paid in full. Using the Post-911 GI Bill or attending a Yellow Ribbon school may fall under the "full ride" status.

A full scholarship is defined as one that provides for payment of tuition, books, fees and/or qualified expenses. **The awards cannot be deferred for future use: the awards must be used for educational expenses incurred during the 2025-2026 academic year. UNUSED FUNDS MUST BE RETURNED TO NOSC.**

AWARDS:

1. Scholarships are awarded on the basis of the spouse's or dependent's scholastic achievement, participation in community based activities, job record and/or volunteer experience and a written essay. Financial need is **not** considered.
2. The NOSC Treasurer will make the payment directly to the accredited institution that the scholarship recipient will be attending. **Awards will only be paid after receipt of commitment verification, student ID number, school registrar mailing address and email address for the college or university or vocational institution.**
3. Awards will be paid in a single installment.

INSTRUCTIONS:

1. The entries on this application form must be complete, accurate, and legible. They must be typewritten or printed in black ink. **Incomplete applications will be disqualified and not reconsidered during the same calendar year.**
2. Fill in all the information requested. If the answer is "none" or not applicable" please make that statement. **Sections left blank will be considered incomplete.**
3. Review the form for completeness and all answers for correctness. Use only this year's current form Scholarship B 2025. Do not send resumes or copies of awards. Provide only the information requested.
4. Sign the application form and ensure that the sponsor also signs it. If your sponsor is unable to sign the application, please state why the sponsor is unable to sign and who is signing on your sponsor's behalf.
5. As used in this application form, the term "sponsor" refers to the family member through whose military service eligibility is claimed. Ensure that the information entered about the applicant or applicant's sponsor accurately describes his/her military affiliation, status, etc.

Please retain this page and a copy of your application for your records. **All completed applications (with required attachments) must be submitted to the NOSC Scholarship Chair via email (noscscholarship@gmail.com) by March 26th at MIDNIGHT local time.** Late and/or incomplete applications will **not** be considered. **All applicants will be notified no later than 09 May 2025 regarding their package and whether or not they are a 2025 scholarship recipient.**

APPLICATION CHECKLIST

ALL items listed must be included in application package to be considered a complete application.

- ❏ **This checklist MUST be included in the application package.**

- ❏ Completed application.

- ❏ Essay (2-pages typed, 12 point Times New Roman font, double spaced with one inch margins, with word count of 600-800 words. Word count is required at the bottom of the essay.) **No identifying information is to be listed on or in your essay.** DO NOT use names, positions, or personal identifiers in the essay. **The use of artificial intelligence software is strictly prohibited**.

- ❏ Photocopy of a photo ID (for example, Driver's License, Passport, Federal or State Issued ID). Please DO NOT send a copy of your Military ID.

- ❏ Proof of sponsor's and student's eligibility/attachment to local command - photo copy of Record of Emergency Data (NAVPERS 1070/602 or "Page 2"), Military Service Record (DD214) or similar documentation confirming sponsor's status AND relationship between the applicant and sponsor. Please provide only the ONE page that states the status and relationship, NOT the entire document.

- ❏ Signed privacy statement.

- ❏ A sealed letter of recommendation from a teacher, counselor, principal, non-family member or community member. No more than two letters.

Please block out all Social Security Numbers to protect your privacy.

PART 1: APPLICANT INFORMATION

Applicant's name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____

Home phone number: _____

Cell phone number: _____

Number of bases stationed in past five years: _____

PART 2: SPONSOR INFORMATION (Spouse, parent, step-parent, or legal guardian through whose sponsorship qualification is claimed.)

Name of sponsor: _____

Home address of sponsor: _____

City: _____ State: _____ Zip Code: _____

Current or last position/rate/rank held: _____

Name of current duty station/employer: _____

Address of current duty stations/employer: _____

City: _____ State: _____ Zip Code: _____

Work phone number: _____

Relationship of sponsor to applicant: _____

PART 3: ACADEMIC INFORMATION

High school name and graduation date: _____

-OR- General Education Development (GED) score and date: _____

Name of current school (if applicable): _____

Please list all secondary education with names of schools, addresses and degrees attained (if

applicable): _____

_____

_____

High School Cumulative Grade Point Average (if applicable): _____

College Cumulative Grade Point Average (if applicable): _____

Part 4: ACTIVITIES (Extracurricular Activities: Please describe your current extracurricular activities (sports, music, performing arts, clubs, community based activities). Activities should only be listed once, do not list events under multiple categories.)

Extracurricular Activity

_____

_____

_____

_____

_____

Part 5: WORK EXPERIENCE (Paid positions only and not listed previously on application.)

Specific Nature of Work Employer/Dates Employed Cumulative Hours

_____

_____

_____

_____

_____

Part 6: VOLUNTEER EXPERIENCE (Unpaid positions only and not listed previously on application.)

Specific Nature of Volunteering Organization/Dates Volunteered Cumulative Hours

_____

_____

_____

_____

_____

Part 7: EDUCATIONAL PLANS

Names of accredited institutions to which you have applied (Please indicate acceptance status.)

_____

_____

_____

_____

Part 8: ESSAY

In regards to your personal and educational goals and objectives, please address the following prompt:

Think back to a situation in your life where you had to decide between taking a risk and playing it safe. Which choice did you make? What was the outcome of your choice? Would you have made the same decision looking back on the experience or would you have made a different decision?

Please do not include your name on/in your essay.

Using artificial intelligence software is strictly prohibited. Applicants must submit their own original work. If your essay is found to be fraudulent or copied, it will be disqualified.

Attach 600-800 words typed, 12-point Times New Roman font, double spaced with one inch margins to this application.

Napoli Operational Support Club
2025 SCHOLARSHIP (B) APPLICATION PRIVACY STATEMENT

The purpose of the information is to apply for educational financial assistance. Information provided will be used to assess scholastic achievement. Completion of the form is mandatory. Failure to provide required information will result in disqualification from participation in the scholarship program. **All completed applications (with required attachments) must be submitted to the NOSC Scholarship Chair via email (noscscholarship@gmail.com) by March 26th at MIDNIGHT local time.** Late and/or incomplete applications will **not** be considered.

Statement of Understanding

I understand that my signature below indicates the information given in the application is true to the best of my knowledge. I further understand that the information is exclusively for the use of the Napoli Operational Support Club and the NOSC Scholarship Committee, and will not be shared with other individuals or agencies without my consent.

I agree that if I am awarded a scholarship, Napoli Operational Support Club has permission to publish my name, my sponsor's name, hometown, college of attendance and photo.

APPLICANT'S NAME

_____

(Please print)

APPLICANT'S SIGNATURE   DATE

_____

SPONSOR'S SIGNATURE   DATE

_____

(If sponsor is unable to sign, another parent/guardian/representative may sign. Please provide explanation.)