



# EL PASO SERGEANTS MAJOR ASSOCIATION

P.O. BOX 6103  
FORT BLISS, TEXAS 79906-0050

## TO ALL APPLICANTS:

### 1. This is the eligibility criteria for the El Paso Sergeants Major Association scholarship grant.

- You must be a family member of an active duty or retired enlisted Service Member of any U.S. branch of service, or an Allied Service, that reside in El Paso County or the immediate surrounding communities.
- You must be a graduating high school senior, of the current academic year, maintaining a “B” average or above GPA.
- You must be planning to attend a four (4) year college/university.
- You must not be in receipt of a full scholarship.
- If selected for this grant, you must furnish a letter of acceptance from the college/university you will attend.

### 2. You must submit the following documents for the grant competition:

- Copy of your academic transcripts and latest SAT/ACT scores.
- An essay describing your educational and professional goals. (Typed & double spaced, not to exceed two pages).
- Three letters of recommendation, from someone other than a relative.
- Completed application form signed by you and your sponsor.
- Photocopy of your dependent id card (front & back). It must be legible.
- A Biographical summary listing your academic/scholastic activities and any community-based organizations that you are a member of. Please identify the purpose or focus of the community-based organizations. List any special talents such as singing, dancing, musical instrument, oral speaking, and athletics that you may possess.
- A copy of your letter of acceptance from the college/university you will attend.

### 3. We must receive your scholarship application packet not later than Tuesday, April 30, 2024. Mail to the address above, ATTN: Scholarship Committee.

### 4. Thank you and good luck!



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## SCHOLARSHIP APPLICATION FORM 2024 ACADEMIC YEAR

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_ PHONE #'S: \_\_\_\_\_

SPONSOR'S NAME & RANK: \_\_\_\_\_

BRANCH OF SERVICE: \_\_\_\_\_

COLLEGE/UNIVERSITY YOU WILL ATTEND: \_\_\_\_\_

DEGREE GOAL: \_\_\_\_\_ MAJOR: \_\_\_\_\_

I DECLARE THAT I HAVE READ THE RULES AND ELIGIBILITY REQUIREMENTS GOVERNING THE SCHOLARSHIP GRANT FROM THE EL PASO SERGEANTS MAJOR ASSOCIATION, THAT I MEET THE REQUIREMENTS, AND THAT I WILL ABIDE BY THE STIPULATIONS THEREOF.

IF SELECTED, I AGREE TO PARTICIPATE IN THE SCHOLARSHIP AWARD CEREMONY AND AGREE TO THE USE AND RELEASE OF MY NAME AND PHOTO IN PUBLIC NOTIFICATIONS BY THE ASSOCIATION.

DATE: \_\_\_\_\_ APPLICANT'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ SPONSOR'S SIGNATURE: \_\_\_\_\_

MAIL TO: EL PASO SERGEANTS MAJOR ASSOCIATION, P.O. BOX 6103,  
EL PASO, TX 79906-0050, ATTN: SCHOLARSHIP COMMITTEE