

EYC Scholar Application

LTC Scholar Applica	Applicant In	formation	
Full Namo:		Date	
Full Name:	First	Date: <i>M.I.</i>	
Address:			
City:	State:	Zip Code:	
Phone:	Email		
Date of Birth:	Grade:	Number of Siblings:	
Sibling Ages & Grades:			
Are you a citizen of the Uni Interests/Involvement:	YES NO ted States? □ □ If no,	are you authorized to work in the U.S.?	ŒS NO □
■ Black Student Unio	on	☐ Hobbies	
☐ Student Council/General		☐ Music Instrument	
		Extracurricular	
		Other	
	Educa	tion	
School Name :		Current Grade/Year:	
Current GPA (estimated): _	Approxi	mate Community Service Hours:	
College/University Name :		YES Did you graduate? □ □	
What are your goals after h What are your career goals		military?	

How do you envision your life as an adult?				
Please list three references. It may	References be a parent/guardian, mentor, school teacher or administrator.			
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Full Name:	Relationship:			
Company:	Phone:			
Address:	Email:			
Full Name:	Relationship:			
Company:	Phone:			
Address:	Email:			
Full Name:	Relationship:			
Company:	Phone:			
Address:	Email:			
	Disclaimer and Signature			
Community (EYC). By enrolling in E	to students who have enrolled with the Endowment for Youth YC Scholars, students agree to the terms and conditions set forth by ue and complete to the best of my knowledge.			
As a parent/guardian of a student un activities sponsored by the Endowm	der the age of 18, I give consent for my student to participate in ent for Youth Community.			
Student Signature:	Date:			
Parent/Guardian Signature				
G	Date:			
Name of Parent/Guardian:	Phone:			
Facili				