# GEORGIA GUARD INSURANCE TRUST SCHOLARSHIP FUND



# SPONSORED BY OFFICER AND ENLISTED ASSOCIATIONS OF THE NATIONAL GUARD OF GEORGIA

GEORGIA GUARD INSURANCE TRUST 3 CENTRAL PLAZA, #356 – ROME, GA 30161 770/739-9651 ~ 1-800/229-1053

## **GEORGIA GUARD INSURANCE TRUST SCHOLARSHIP FUND**

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## <u>ELIGIBILITY</u>:

Option 1 Policyholders of the GEORGIA GUARD INSURANCE TRUST with a minimum of \$10,000 life insurance coverage who\_are members of the NGAGA or the EANGGA. (Currently serving Georgia National Guard Members ONLY will receive priority.)

<u>PLEASE NOTE</u>: A GUARD MEMBER MUST HAVE HIS/HER OWN LIFE INSURANCE POLICY THROUGH THE GGIT FOR A MINIMUM OF \$10,000 COVERAGE (See GGIT.ORG) AND ALSO HAVE HIS/HER OWN ASSOCIATION MEMBERSHIP (See NGAGA.ORG or see EANGGA.COM to join or renew). THE INSURANCE POLICY OR ASSOCIATION MEMBERSHIP OF ANY OTHER GUARD MEMBER <u>WILL NOT</u> BE ACCEPTED.

- *Option 2* Spouses, children, and grandchildren of persons noted in Priority 1 above.
- Option 3 Graduate Students. Currently serving members of the Georgia National Guard who are policyholders with the GEORGIA GUARD INSURANCE TRUST and are members of the NGAGA or the EANGGA. (These members will receive priority consideration.)

#### <u>AWARDS</u>:

Up to Ten (10) \$3,000.00 Scholarships will be awarded each calendar year, pending funding.

Additional \$1,000 scholarships may be awarded pending availability of funds.

#### CRITERIA:

- \* \* \* For Colleges or Universities
- 1. Applicant must be in good academic standing with a combined Scholastic Aptitude Test (SAT) score of at least 1000, an ACT score of at least 19, <u>or</u> a minimum Cumulative Grade Point Average (GPA) of 3.0. Applicants currently enrolled in a college or university must also have a minimum Cumulative GPA of 3.0.
- 2. Must be enrolled or accepted for enrollment in a college or university. Written proof of acceptance is required and must be included with this application.
  - Drilling Guard members may be half-time (minimum 6 semester hours) or full-time (12 semester hours). *Guard members enrolled half-time are eligible for \$1,000 scholarships ONLY.*
  - Family members must be full-time (12 semester hours).
- 3. Must be of good character, moral and personal traits.

- 4. Applicants should have some academic, athletic or community service honor.
- \*\*\* *For Vocational or Business Schools (Technical College System)* 
  - 1. Applicant must meet program specific admission standards and institutional requirements and complete all admissions procedures for admission to a degree/diploma program in REGULAR PROGRAM ADMISSION STATUS.
  - 2. Must be enrolled or accepted for enrollment. Written proof of acceptance is required and must be included with this application.
    - Drilling Guard members may be half-time (minimum 6 semester hours) or full-time (12 semester hours). *Guard members enrolled half-time are eligible for \$1,000 scholarships ONLY.*
  - 3. Must be of good character, moral and personal traits.

\* \* \*<u>For Graduate or Doctoral Schools (</u>Currently serving Georgia National Guard members <u>Only</u>)

1. Applicant must be currently enrolled or accepted for enrollment as a graduate student in a college or university. Individual must have a minimum 3.0 Cumulative GPA as an undergraduate and maintain a 3.0 GPA in graduate school. Written proof of acceptance or enrollment is required and must accompany this application.

2. Be of good character, moral and personal traits.

\*\*\*APPLICATIONS ARE ACCEPTED FROM <u>JANUARY 1<sup>ST</sup> – APRIL 15<sup>TH</sup></u> OF EACH YEAR. ALL APPLICATIONS AND SUPPORTING DOCUMENTATION MUST BE POSTMARKED <u>NO LATER</u> <u>THAN APRIL 15<sup>TH</sup></u> OF EACH YEAR. ANY APPLICATION (OR SUPPORTING DOCUMENT) POSTMARKED AFTER APRIL 15th WILL NOT BE CONSIDERED.

ALL SCHOLARSHIPS WILL BE AWARDED IN THE SUMMER FOR THE FALL SEMESTER OF THAT YEAR. APPLICANTS WILL BE NOTIFIED, IN WRITING, BY THE GEORGIA GUARD INSURANCE TRUST OF THEIR SELECTION/NON-SELECTION AND THE AMOUNT OF SCHOLARSHIP AWARDED.

> MAIL APPLICATIONS & SUPPORTING DOCUMENTATION TO: GGIT - 3 CENTRAL PLAZA, #356 – ROME, GA 30161

If you have any questions, you may call the GEORGIA GUARD INSURANCE TRUST at 770-739-9651 or 1-800-229-1053

## **GEORGIA GUARD INSURANCE TRUST SCHOLARSHIP FUND**

## **APPLICATION**

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#### **APPLICATION INFORMATION**

NAME	SSN (LAST 4):		
(LAST, FIRST, MI) OME ADDRESS:			
HOME ADDRESS.			
(CITY)	(STATE)	(ZIP CODE)	
TELEPHONE NUMBER:	BIRTH DATE:	· · · · · ·	
NAME OF HIGH SCHOOL OR HOM	E SCHOOL:		
ADDRESS OF HIGH SCHOOL OR H	IOME SCHOOL:		
(CITY)	(STATE)	(ZIP CODE)	
GRADUATION DATE:	CUMULATIVE GPA:C	CLASS RANKING:	
CURRENT STATUS OF APPLICAN ( ) High School ( ) Home Scho	T: ( <i>Check One</i> ) ol ()College/University ()Vocational/E ()Full Time ()Part Time  # of Sem		
If you are Currently Enrolled in Co (GPA):	llege/University, Please Provide your current	t Cumulative Grade Point Average	
College/University Cumulative GP	A Vocational/Business Cumulati Cumulative GPA	ve GPA	
NAME AND ADDRESS OF SCHOO	L ATTENDING OR PLANNING TO ATTEND:		
HAVE YOU BEEN ACCEPTED FOR	ENTRANCE? () YES () NO		
ARE YOU CURRENTLY A MEMBER	R OF THE GEORGIA NATIONAL GUARD? (	)YES ()NO	
UNIT OF ASSIGNMENT:			
RANK / PAY GRADE			
	GGIT POLICY HOLDER INFORMATION		
NAME OF POLICY HOLDER (IF A	PPLICANT IS CURRENT GUARD MEMBER, P	LEASE SKIP & SIGN BELOW):	
	RANK / P	AY GRADE:	
RELATIONSHIP TO APPLICANT: HOME ADDRESS (STREET / P O B	OX): SSN (LAS	ST 4):	
(CITY)	(STATE)	(ZIP CODE)	
UNIT OF ASSIGNMENT:	(0)		
(SIGNATURE OF APPLICANT)		(DATE)	

### AGREEMENT OF INSURANCE WITH GGIT

## I AGREE TO RETAIN AT LEAST \$10,000 OF LIFE INSURANCE WITH GGIT FOR A MINIMUM OF TWO (2) YEARS FOLLOWING COMPLETION OF THE SCHOOL YEAR FOR WHICH SCHOLARSHIP IS AWARDED.

(Signature of Policyholder)			(Date)	
I HAV	E PURCHASED OR RENEWED MY ASS		MEMBERSHIP FOR THE CURRENT YEAR:	
	() EANGGA - See EANGGA.COM	OR	() NGAGA – See NGAGA.ORG	
Signature of Policyholder			(Date)	
			NSURANCE WITH GGIT e will complete)	
	(PRINTED NAME OF POLICYHOLDER)		-	
HAS 1	THE FOLLOWING INSURANCE COVERA	GE IN FOR	RCE WITH THE GEORGIA GUARD INSURANCE TRUST:	
Perso	nal Life Insurance:	Depe	endent/Spouse Life Insurance:	
	(Signature of GGIT Official)	_	(DATE)	
	SUPPORTING DOCUMEN	NTS THAT	T MUST ACCOMPANY APPLICATION	
1.	COMPLETED APPLICATION (THIS DOC	CUMENT), <u>/</u>	ALONG WITH THE FOLLOWING:	
2.	<u>CERTIFIED (OFFICIAL)</u> TRANSCRIPT OF HIGH SCHOOL OR HOME SCHOOL CREDITS FOR CURRENT HIG SCHOOL STUDENTS. <u>CERTIFIED (OFFICIAL)</u> TRANSCRIPT OF CREDITS FROM INSTITUTION OF HIGHER LEARNING FOR APPLICANTS CURRENTLY ENROLLED IN COLLEGE/ UNIVERSITY/GRADUATE SCHOOL.			
3.	VERIFICATION OF SAT OR ACT SCORES (IF NOT INCLUDED ON TRANSCRIPT). ***THIS REQUIREMENT APPLIES TO CURRENT HIGH SCHOOL STUDENTS ONLY.			
4.	A ONE (1) PAGE, FIVE (5) PARAGRAPH THEME FROM APPLICANT WITH SPECIFIC FACTS STATING HIS/HER DESIRE TO CONTINUE HIS/HER EDUCATION. (EXAMPLE: (1) INTRODUCTION, (2) EXTRA CURRICULAR ACTIVITIES, (3) COMMUNITY INVOLVEMENT, (4) HOW YOUR EDUCATION WILL IMPROVE YOURSELF AND YOUR COMMUNITY, (5) CONCLUSION).			
5.	ONE (1) CURRENT (DATED WITHIN THE CALENDAR YEAR) LETTER OF RECOMMENDATION VERIFYING THE APPLICANT'S GOOD CHARACTER, MORAL AND PERSONAL TRAITS (SHOULD BE FROM AN EMPLOYER, COMMUNITY LEADER, MINISTER, ETC. – SHOULD <u>NOT</u> BE FROM A PARENT.)			
6.	ONE (1) CURRENT (DATED WITH THE CALENDAR YEAR) LETTER OF ACADEMIC REFERENCE (SHOULD BE FROM A PRINCIPAL, COUNSELOR, DEAN, PROFESSOR OR PARENT OF HOME SCHOOL STUDENT).			
7.	AGREEMENT TO KEEP INSURANCE WITH GGIT AND AFFIRMATION OF ASSOCIATION MEMBERSHIP SIGNED BY POLICYHOLDER (THIS DOCUMENT).			
8.	VERIFICATION FROM THE GGIT OFFICE THAT INSURANCE WITH GGIT IS IN FORCE. (WILL BE COMPLETED BY GGIT OFFICIAL) (THIS DOCUMENT).			
9.	PROOF OF ACCEPTANCE FOR ADMISSION OR GOOD STANDING AT INSTITUTION OF HIGHER LEARNING WHICH APPLICANT WILL ATTEND OR IS ATTENDING.			
10.	EXPECTED DATE OF COMPLETION OF		ATED COST PER COURSE/QUARTER/SEMESTER AND S. (Rev 12/08/21)	