

Through the gifts of generous donors, the Pat Tillman Veterans Center Scholarship (formally known as the Veterans Education Fund) was established to offer multiple scholarships to student veterans to support their higher education journey. Our generous donors are devoted to the success of student veterans nationally and at Arizona State University. Scholarships are based on a student's financial need, academic performance, and potential to complete their program of study. Awards are good for only one semester, but awardees may reapply each semester.

The Pat Tillman Veterans Center Scholarship (formerly known as the Veterans Education Fund) was established through the contributions of generous donors to provide multiple scholarships to student veterans. The contributors are devoted to the success of student veterans both nationally and at Arizona State University. Awards will be based on a student's financial need, level of effort, and potential to complete their program of study. Awards are only valid for one semester, but recipients may reapply each semester.

Scholarship awards: A maximum of \$1,000 per student.

Number of awards: A minimum of three scholarships will be awarded during

the fall and spring semesters only.

Eligibility requirements:

- Provide a valid DD-214/DD-215 (Member-4 copy) as proof of veteran status with an honorabledischarge, or a letter from your commander confirming active/reserve/guard status in good standing.
- Current ASU student, with at least one completed fall or spring term prior to the term ofapplication.
- Turn in a completed application by the deadline with <u>all checklist items</u>. Late or incompleteentries will <u>not</u> be accepted.

Applications will be accepted beginning Friday, January 19, 2024, and must be submitted by email to ptvcadvocate@asu.edu. In the subject line of your email, use only your last name followed by "PTVC Scholarship Application" (for example; Smith, PTVC Scholarship Application) Or, the Pat Tillman Veterans Center at each campus can assist with creating scanned documents for this scholarship as necessary.

Application Deadline: Sunday, February 25, 2024, 11:59 p.m.

Awardees will be notified by Friday, March 1, 2024.



SPRING 2024 APPLICATION FORM

Name:			ASU II	ASU ID#		
Last	First	M.		,		
Branch of Service:			Dates	of Service:		
Phone:						
Local Address:						
Street Address	City		State	Zip		
ASU Email Address:						
ASU College/Department:						
Major(s):						
Academic Level (must have cor	npleted at least one	semester at ASI	J):			
Freshman	Sophomore	Junior	Senio	r Graduate Student		
Number of Credit Hours Planne	ed (for Spring 2024 o	nly):				
Anticipated Graduation Date fo	or Current Degree (m	onth/year):				



APPLICATION CHECKLIST					
PLEASE INCLUDE THESE ITEMS WITH YOUR APPLICATION: (APPLICATIONS MUST BE SUBMITTED SINGLE-SIDED, IN THIS ORDER)					
□ Application	Complete the application and consent forms included in this document.				
□ <u>DD-214/215</u>	Submit a copy of the Member-4 page. Only copies of the official document are acceptable. For active/reserve/guard members, submit a letter from your commander validating your status and good standing.				
☐ Financial Need	All applicants <u>must</u> file a Free Application for Federal Student Aid (FAFSA) and have the resulting "Student Aid Report" on file at the ASU Student Financial Assistance Office in order to qualify for need-based scholarships. Additionally, complete the attached Financial Need Worksheet.				
☐ <u>Personal Statement</u>	Up to one page, typed and double-spaced, explaining your situation and how this scholarship will help to meet your specific needs.				
□ Goals Essay	One page, typed and double-spaced, providing an overview of your immediate goals and how you plan to leverage your education towards future goals.				
□ <u>Letter of Recommendation</u>	Your recommender should have the same level of authority as the one you would choose for a career reference. Have the individual writing the letter submit it separately to: ptcvadvocate@asu.edu . In the subject line, have your recommender include your last name only, followed by the word "recommendation." For example, John Smith's recommender would use the following subject line: "Smith Recommendation."				



* * ALL APPLICANTS * *

CONSENT TO RELEASE RECORDS

Among other rights afforded to me under Federal Legislation commonly known as "The 1974 Family Educational Rights and Privacy Act," as amended, I understand that I have the right to specify the name of each and every individual to whom my records are released.

I further understand that I may waive my right to specify the name of each scholarship donor or scholarship committee to whom my records are released as long as such records are used only in connection with the ASU Foundation Office of Scholarship Development and Administration. I hereby authorize the Office of Scholarship Development and Administration to gather and release all records maintained by the office concerning me. Such records may contain the following:

- a. Letter of recommendation bearing specifically on my application for scholarship.
- b. Other documents and information relating to my academic performance.
- c. Documents and information relating to my financial status.

I certify that the information throughout this application is accurate and that misrepresentation of any facts or details could result in ineligibility for any scholarships/awards.

Print Name	
Signature	Date



Financial Needs Worksheet

Spring 2024 Semester Information

School Related Income (as applicable, over the entire semester) Financial Aid Grants Other Scholarships (or Tuition Assistance) GI Bill Benefits towards tuition and fees GI Bill Benefits toward books and supplies	Total:	\$\$ \$\$ \$\$
School Related Expenses (as applicable, over the entire semester) Tuition and Fees Books and Supplies Other school-related costs (Please list): If on the Post 9/11 GI-Bill, list the percentage of eligibility:%	Total:	\$\$ \$\$ \$
Monthly Personal Income/Expense Personal Income GI Bill Basic Allowance for Housing Job Income Other Income (Please list):	S	\$ \$ \$ \$
Personal Expenses Monthly Living Costs (rent, car, food, utilities, etc.) Other Expenses (Please list): dditional Comments:	Total:	\$\$ \$ \$