

**ASSOCIATION OF AVIATION ORDNANCEMEN
ROBERT L. CROW
SCHOLARSHIP APPLICATION - 2020**

March 12, 2020

This application is to be used to apply for the annual scholarship(s) awarded by the Association of Aviation Ordnancemen Robert L. Crow Scholarship. The Scholarship Committee Chairman must receive the complete application by, or it must be postmarked no later than, the 15th day of the month in the month preceding the start of The Association of Aviation Ordnancemen's Annual Convention/Symposium. Applications received in any other manner will not be accepted. All applicants will be notified of their selection or non-selection as soon as practicable after the selection(s) is made. Those selected will receive their award package no later than 60 days after selection.

Mail completed application to:

**ASSOCIATION OF AVIATION ORDNANCEMEN
ROBERT L. CROW SCHOLARSHIP
Rick Garza, Scholarship Committee Chairman
10213 Rolling Green Way
Fort Washington, MD 20744**

APPLICATION INSTRUCTIONS:

1. This application must be attached to a cover letter that has a personal typewritten statement letter, not to exceed 300 words max by the applicant, in their own words, requesting consideration for this award. In addition, this cover letter should also state why the applicant desires the award and what are their education goals. Include a separate brief biography, not to exceed 500 words max, and a separate recent photo suitable for publication; do not attach to cover letter or biography.

2. Only typed or computer generated application will only be accepted.

HAND WRITTEN APPLICATIONS WILL NOT BE ACCEPTED.

3. Fill out all portions of the application completely.

4. If a space does not apply, mark "NA".

5. Attach an "official certified transcript copy" of high school and/ or college, trade or technical school transcripts.

UNOFFICIAL TRANSCRIPTS WILL NOT BE ACCEPTED.

6. Include any additional information about yourself, which you may feel worthy for consideration, i.e. work, civic, school activities, etc.

7. Read the Rules and Information in below pages 2 and 3.

8. **Do not mail this or RULES AND INFORMATION sheets with application.**

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RULES AND INFORMATION

1. ELIGIBILITY:

1. REGULAR MEMBER or ASSOCIATE MEMBER, in good standing, of the ASSOCIATION of AVIATION ORDNANCEMEN. **See Note.**
2. Dependents or immediate family (brother/sister/grandchildren) of a REGULAR MEMBER or ASSOCIATE MEMBER, in good standing, of the ASSOCIATION of AVIATION ORDNANCEMEN. **See Note.**
3. Dependents of a deceased Aviation Ordnancemen of the U. S. Navy or Marine Corps. DD Form-214 or appropriate supporting documentation, that the deceased was an Aviation Ordnancemen, is required.
4. Officers of the Scholarship Committee and their family members are not eligible to apply for or sponsor a scholarship during the Officer's term of office and for 5 years from the date the Officer leaves office.

NOTE: For the purpose of the Scholarship Program only "in good standing" is defined as:

1. The sponsor must have completed at least one full year as a dues current member prior to 1 January of the year in which application is being submitted for.
2. The sponsor's dues must be current as of the date the Association of Aviation Ordnancemen's Convention/Symposium begins.

2. USE:

A scholarship granted to an individual may be used to meet any authorized expenses incurred for continuing education past high school in any field of endeavor. Continuing education means attendance at a university, college, technical, and trade or specialty school normally attended in seeking education beyond high school. Payment will only be made in U.S. currency and that funds are paid to the approved and recognized US and its territories educational facilities.

3. VALUE:

The AAO National Board of Directors sets the number of scholarships to be given and the value of each at their Board of Directors Meeting.

4. SELECTION CRITERIA:

The Scholarship Committee Chairman will review all applications to determine the applicant's eligibility and if the application package is complete. If the applicant is not eligible or the application package is not complete it will be removed from consideration for a scholarship. Action to remove the package is considered final.

Selection of an individual to receive a scholarship will be based on, but not limited to the following considerations: **(a)** Academic record, **(b)** Needs of the individual, **(c)** Goals of the individual, **(d)** Eligibility for and award of other scholarships and educational grants.

5. SELECTION AND NOTIFICATION:

The Scholarship Selection Committee, consisting of at least 6 members, will normally meet on Friday during the Association of Aviation Ordnancemen's Annual Convention / Symposium to select that year's winner(s) for the Robert L. Crow Scholarship(s). Decisions made by the Selection Committee, concerning selection or non-selection, are considered final. The winner(s) of the scholarship(s) will be announced during the Association of Aviation Ordnancemen's Awards Banquet normally held on Saturday. Within 60 days following their selection, the Scholarship Committee Chairman or his appointed representative, will notify the winner (s) in writing. As soon as practicable, after the Convention/Symposium, the Scholarship Committee Chairman or his appointed representative will notify, by email notice, all applicants who were not selected for a scholarship. Any application package removed from consideration, the Scholarship Committee Chairman will notified via email the applicant along with a brief explanation on the reason for removal.

6. APPLICATION REQUIREMENTS:

The applicant will require submitting the following 5 requirements information:

- 1. Personal Statement Cover Letter:** not to exceed 300 words max typewritten. Reason(s) you feel that you should receive the scholarship and your educational goals and how the scholarship will help continue your education.
- 2. Brief biography:** not to exceed 500 words max typewritten. Describe who you are, your personal qualities, present activities, academic/professional accomplishments etc.
- 3. A recent photo**
- 4. Robert L. Crow Application:** Fill in all applicable sections and mark N/A for all remaining non-applicable fields.
- 5. A certified copy of scholastic official transcripts**

The Committee Chairman will deliver all accepted applications to the Scholarship Selection Committee board for their review and nomination.

THE COMMITTEE CHAIRMAN MUST RECEIVE THE COMPLETED APPLICATION POSTMARKED NOT LATER THAN, THE 15TH DAY OF THE MONTH IN THE MONTH PRECEDING THE START OF THE ASSOCIATION OF AVIATION ORDNANCEMEN'S ANNUAL CONVENTION / SYMPOSIUM. APPLICATIONS RECEIVED AFTER 15TH DAY OF THE MONTH PRECEDING THE START OF THE AAO CONVENTION WILL NOT BE ACCEPTED. (i.e. 15th of June if the convention is held in July, etc.)

Best of luck in your continuing efforts of educational growth and endeavors!

DO NOT SUBMIT THE INSTRUCTION PAGE AND RULES AND INFORMATION SHEETS

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| SECTION 1 | | APPLICANT'S INFORMATION | | | | (page 1 of 2) |
|---|---------------|--------------------------------|---------------------------|--------------------------|-------------------------|---------------|
| LAST NAME | FIRST | MI | SSN(last 4digits only) | DOB | YR. OF APP. | |
| | | | | | | |
| STREET | CITY | | STATE | ZIP | TELEPHONE | |
| EMAIL ADDRESS: | | | | | | |
| SECTION 2 | | PARENT/ GUARDIAN INFO. | | | | |
| LAST NAME | FIRST | MI | SSN(last 4digits only) | APPROX. HOUSEHOLD INCOME | | |
| | | | | | | |
| STREET | CITY | | STATE | ZIP | TELEPHONE | |
| NUMBER OF DEPENDENTS OTHER THAN APPLICANT: | | | | | | |
| SECTION 3 | | SPONSOR INFORMATION | | | | |
| LAST NAME | FIRST | MI | SSN(last 4digits only) | RELATION TO APP. | AAO# | |
| | | | | | | |
| CHECK ONE: AAO MEMBER ___ ASSOC. AAO MEMBER ___ DECEASED AVIATION ORDNANCEMAN ___ | | | | | | |
| SECTION 4 | | PREVIOUS EDUCATION | | | | |
| HIGH SCHOOL ATTENDED: | | | GRADUATED: YES ___ NO ___ | | GPA _____ of 4.0 or 5.0 | |
| STREET | CITY | | STATE | ZIP | | |
| COLLEGE, TRADE, TECHNICAL SCHOOL ATTENDED: | | | GRADUATED: YES ___ NO ___ | | GPA _____ of 4.0 or 5.0 | |
| STREET | | | STATE | ZIP | | |
| SECTION 5 | | PLANNED EDUCATION | | | | |
| NAME OF SCHOOL YOU PLAN TO ATTEND | | | | | | |
| STREET | CITY | | STATE | ZIP | | |
| LOCATION OF FINANCIAL AID OFFICE | | | PHONE (INCLUDE AREA CODE) | | | |
| STUDENT ID NUMBER: | | | | | | |
| PLANNED COURSE OF STUDY OR MAJOR: | | | | | | |
| Check One and Mark N/A for all remaining non-applicable fields | | | | | | |
| FRESHMAN | SOPHOMORE | JUNIOR | SENIOR | LENGTH OF PROGRAM | | |
| | | | | | | |
| GRADUATE | POST GRADUATE | VOCATIONAL TRAINING | | | | |
| | | | | | | |

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| SECTION 6 | | FINANCIAL INFORMATION (page 2 of 2) | |
|--|---|--|--|
| PROVIDE THE FOLLOWING FINANCIAL INFORMATION FOR ONE (1) FULL SCHOOL YEAR. IF UNKNOWN, ESTIMATE AS CLOSE AS POSSIBLE. | | | |
| COST OF EDUCATION | | SOURCE OF FUNDING* | |
| TUITION & fees* | | SAVINGS | |
| ROOM & BOARD | | SCHOLARSHIPS/ GRANTS | |
| BOOKS & SUPPLIES | | LOANS | |
| TRANSPORTATION | | PARENTS/ GUARDIANS | |
| PERSONAL EXPENSES | | RELATIVES/ FRIENDS | |
| OTHER EXPENSES | | PART TIME INCOME | |
| * INCLUDE LAB AND OTHER FEES | | OTHER INCOME | |
| TOTAL | | TOTAL | |
| <p>IS THE APPLICANT IN COMPETITION FOR OR HAVE RECEIVED OTHER SCHOLARSHIPS, GRANTS, OR AWARDS FOR THE <u>UPCOMING ACADEMIC YEAR</u>?</p> <p>* <u>INCLUDE ANY APPLIED FOR OR RECEIVED FEDERAL STUDENT AID (FSA).</u></p> <p>YES ___ NO ___</p> <p>IF YES, BRIEFLY DESCRIBE BY INDICATING THE SPONSORING ORGANIZATION AND AMOUNT.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> | | | |
| <p>BRIEFLY DESCRIBE EMPLOYMENT DURING THE PAST TWO (2) YEARS:</p> <p>_____</p> <p>_____</p> <p>_____</p> | | | |
| SECTION 7 | | ATTESTATION | |
| <p>THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE. IF THERE ARE ANY CHANGES TO ANY OF THE ABOVE SUPPLIED INFORMATION, I WILL INFORM THE FOUNDATION OF THESE CHANGES. I ALSO UNDERSTAND THAT FAILURE TO DO SO COULD RESULT IN REMOVAL OF ANY AWARDED SCHOLARSHIP.</p> <p>(IF APPLICANT IS THE SPONSOR, SIGN BOTH LINES)</p> <p>SIGNED: (APPLICATION WILL NOT BE ACCEPTED IF NOT SIGNED)</p> | | | |
| <p>_____</p> <p style="text-align: center;">Applicant</p> | <p>_____</p> <p style="text-align: center;">Date</p> | | |
| <p>_____</p> <p style="text-align: center;">Parent/Guardian/Sponsor</p> | <p>_____</p> <p style="text-align: center;">Date</p> | | |