

A HERO'S LEGACY ~ THE JOE JOHNSON FOUNDATION SCHOLARSHIP/ VETERAN MOBILITY APPLICATION

APPLICANT INFORMATION

Name:

Phone Number:

Current address:

City:

State:

ZIP Code:

High School:

City:

State/Zip:

PARENT/GUARDIAN INFORMATION (IF APPLICABLE)

Name:

Relationship:

Phone:

Current address:

City:

State:

ZIP Code:

SERVICE MEMBER INFORMATION

Service Member Name:

Service Connected VA Member Number:

Branch of Service:

Service Member Rank:

Date of Death:

Date of Injury:

Place of Death/Injury:

INTENDED UNIVERSITY, COLLEGE, TRADE SCHOOL (IF APPLICABLE)

Name:

Address:

City:

State:

ZIP Code:

TELL US ABOUT YOURSELF

REFERENCE #1

Name:

Address:

Phone:

City:

State:

ZIP Code:

Relationship:

REFERENCE #2

Name:

Address:

Phone:

City:

State:

ZIP Code:

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Signature of applicant	Date
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Signature of Parent/Guardian (If Applicable)	Date
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***Veteran Mobility Applicant must provide a copy of valid Drivers License/State ID and a copy of Service Connected VA ID card.

***Scholarship applications are reviewed by an independent council not in any way related to or affiliated with A Hero's Legacy ~ The Joe Johnson Foundation. Applications must be received by May 1st. Notification of scholarship award will be made on or about June 1st.

Mail application to: A Hero's Legacy ~ The Joe Johnson Foundation
P.O. Box 7862
Flint, MI 48507

Email application to: Joejohnsonlegacy@aol.com