

# CHIEF PETTY OFFICER SCHOLARSHIP AWARD FORM



This form must be completely filled out and returned by 1 Aug 2019 in order for the CPOSF to release the award to the student's school.

## STUDENT INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## SPONSOR INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**I authorize the Chief Petty Officer Scholarship Fund (CPOSF) to release my information to the CPOSF Public Affairs Office and the school indicated below:**

**SCHOOL INFORMATION** (Please ***Ensure*** you provide the correct address for ***scholarship payments*** to your school. Your Scholarship Check will be mailed directly to the address provided below.)

Name of School: \_\_\_\_\_

School's Preferred Payment Address:

Office of: \_\_\_\_\_

Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

Student's Phone Number at School: \_\_\_\_\_

Student's Email Address while at School: \_\_\_\_\_

After completing the form ***email*** it to: [admin@cposf.org](mailto:admin@cposf.org)

**OR** Snail Mail to: CPOSF, 328 Office Square Lane, Suite 101A, Virginia Beach, VA 23462