



USS ENTERPRISE (CVAN/CVN-65) ASSOCIATION Scholarship Application

Scholarship Chairman
Donald Thiry
26831 Coachlight
Woodhaven MI 48183

PERSONAL INFORMATION

TO BE COMPLETED BY THE APPLICANT. PLEASE PRINT OR TYPE, BLACK INK

Include a photo, head and shoulder only.
Print name, month and year of photo on the back of the photo.
Place photo in an envelope and attach it to the application.
Do NOT staple through the photo

Name _____

Address _____

City _____ St. _____ ZIP _____

Soc. Sec. # _____ D.O.B. _____ Phone# (____) _____ - _____

Name of School attended in the past academic year: _____

Address _____ City _____ St. _____ Zip _____

Principal/Dean _____ Anticipated graduation date: _____

Name of school for fall enrollment (if different than above) _____

Address _____ City _____ St. _____ Zip _____

Check one Freshman Sophomore Junior Senior Major course of study _____

Relationship to Sponsor _____ Current GPA _____

Have you ever attend any Association reunions years/location _____

To be completed by your sponsor

Sponsor's name _____ Phone # (____) _____ - _____

Address _____ City _____ St. _____ Zip _____

Date you joined the Association _____ Work Phone # (____) _____ - _____

Association office held if any (title and dates) _____

Other committee or reunions you attended titles and dates _____

I hereby make application for a
USS Enterprise Association scholarship . _____ Date _____

Applicants Signature

