

# ONGA Leadership Grant Application

Date \_\_\_\_\_ SSAN \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_  
          *last*                                  *first*                                  *mi*

Address \_\_\_\_\_  
          *city*                                  *state*                                  *zip*

home phone (\_\_\_\_\_) \_\_\_\_\_ work phone (\_\_\_\_\_) \_\_\_\_\_

*Marital Status*     Single     Married, number of dependents \_\_\_\_\_

## *Academic Status* (check all that apply)

- High School Senior     Accepted to College     College Student  
 Business/tech student     Working

Name and address of school or college you plan to attend or are attending.

\_\_\_\_\_  
\_\_\_\_\_

Name and address of your local newspaper.

\_\_\_\_\_  
\_\_\_\_\_

*Academic Standing.* Year in school (12–16) \_\_\_\_\_. Class ranking \_\_\_\_ of \_\_\_\_  
GPA \_\_\_\_\_ (adjust to 4 point scale, where A = 4.0, B = 3.0). Explain if differ-  
ent than transcripts (attach sheets as needed). \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Honors & Awards (list & explain; attach additional sheets as needed).

\_\_\_\_\_  
\_\_\_\_\_

Membership & leadership (list & explain; attach additional sheets as needed).

\_\_\_\_\_  
\_\_\_\_\_

## *Eligibility*

1. Are you an officer in the Ohio National Guard? (Y/N) \_\_\_\_\_
2. Are you a member of the ONGA? (Y/N) \_\_\_\_\_
3. Are you the dependent of a member of the ONGA? (Y/N) \_\_\_\_\_

If yes to 1 or 3 please complete the following information about your sponsor:

Name and rank \_\_\_\_\_

Address \_\_\_\_\_

Current or last unit \_\_\_\_\_

Sponsor status     Active     Life     Retired     Deceased

*I have answered all of the questions to the best of my knowledge and belief.*

\_\_\_\_\_

*Signature of applicant*