2026 Scholarship Application

Name: _____ Date: _____

Present School Name and Address: _____

_____

Applicant Phone Number: _____ E-mail: _____

Permanent Address: _____

Permanent Phone: _____ Email: _____

School Name: _____ Year in School (next year): _____

        (To Be Attended Next Year)

Major or Field of Study: _____

Submit your completed application no later than June 1st, to the Scholarship Committee Chair, Christina Gonzales at GonzalesC@BV.com.
If you have questions, please call Christina Gonzales at 913-458-6270.

PRIVACY ACT and ACKNOWLEDGEMENT

I acknowledge reading the instructions pertaining to this benefit application and fully understand the requirements stated therein. By signing, I am verifying that the information I have provided to the SAME Greater Kansas City Post Education and Mentoring Endowment is accurate to the best of my knowledge and I freely consent to allow the SAME GKC Post Education and Mentoring Scholarship Committee to confirm all the information included herein. If selected for a scholarship, I agree to allow the use of my name and picture for publication in local newspapers, media, and SAME GKC publications.

I understand that the primary purpose of the information submitted is for the SAME Greater Kansas City Post Endowment Benefit Scholarship Committee to judge my application for possible award of a Benefit Grant or Scholarship. Disclosure of all information is **voluntary**; however failure to provide requested information may result in the committee and its designated judges the inability to completely judge the submitted packet and determine eligibility for an award of a scholarship. All information is used solely for the purpose of judging the applicant for a Benefit Named Grant or a Benefit Named Scholarship.

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Complete the following information. Use extra sheets as necessary.

1. Credit Hours anticipated next semester: _____

2. Faculty References: Include with this application the names of two faculty references; graduate students may list professional references. Please write the names and telephone numbers of your two references:

   a. _____

   b. _____

3. Transcript: Attach a digital copy of applicant's current College transcript or cumulative grade card. A downloaded copy from your student portal is sufficient. There is no need to pay for a transcript to be sent.

4. Grade Point Average: _____

5. Are you a student, young member or regular member of The Society of American Military Engineers (SAME)?

   NO_____   YES_____

6. Are you a member of a Student Chapter of The Society of American Military Engineers (SAME)?

   NO_____   YES_____ Indicate Chapter: _____

7. Are you an Officer (President, Vice-President, Treasurer, Secretary) for a Student Chapter of The Society of American Military Engineers (SAME)?

   NO _____   YES _____   Indicate Position: _____

8. Are you a member of the military (active duty or reserves), ROTC or JROTC?

   NO_____   YES _____

9. Are you the son or daughter of an Active, Reserve or Retired Service Member?

   NO_____   YES _____

10. Submit a 500 word essay describing your interest in pursuing a degree in your field of study, also address your interest in the Society of Military Engineers Greater Kansas City Post. *The essay must be an original creation of the applicant and typed, double spaced.*

Applicant Signature: _____   Date: _____

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Please send electronic applications to the Scholarship Committee Chair, Christina Gonzales at GonzalesC@BV.com.