

**GEORGIA GUARD
INSURANCE TRUST
SCHOLARSHIP FUND**



**SPONSORED BY
OFFICER AND ENLISTED ASSOCIATIONS
OF THE
NATIONAL GUARD OF GEORGIA**

**GEORGIA GUARD INSURANCE TRUST
3 CENTRAL PLAZA, #356 – ROME, GA 30161
770/739-9651 ~ 1-800/229-1053**

GEORGIA GUARD INSURANCE TRUST SCHOLARSHIP FUND

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OF THE NATIONAL GUARD OF GEORGIA

ELIGIBILITY:

Option 1 Policyholders of the GEORGIA GUARD INSURANCE TRUST with a minimum of \$10,000 life insurance coverage who are members of the NGAGA or the EANGGA. (Currently serving Georgia National Guard Members ONLY will receive priority.)

PLEASE NOTE: A GUARD MEMBER MUST HAVE HIS/HER OWN LIFE INSURANCE POLICY THROUGH THE GGIT FOR A MINIMUM OF \$10,000 COVERAGE (See GGIT.ORG) AND ALSO HAVE HIS/HER OWN ASSOCIATION MEMBERSHIP (See NGAGA.ORG or see EANGGA.COM to join or renew). THE INSURANCE POLICY OR ASSOCIATION MEMBERSHIP OF ANY OTHER GUARD MEMBER WILL NOT BE ACCEPTED.

Option 2 Spouses, children, and grandchildren of persons noted in Priority 1 above.

Option 3 Graduate Students. Currently serving members of the Georgia National Guard who are policyholders with the GEORGIA GUARD INSURANCE TRUST and are members of the NGAGA or the EANGGA. (These members will receive priority consideration.)

AWARDS:

Up to Ten (10) \$3,000.00 Scholarships will be awarded each calendar year.

Additional \$1,000 scholarships may be awarded pending availability of funds.

CRITERIA:

***** For Colleges or Universities**

1. Applicant must be in good academic standing with a combined Scholastic Aptitude Test (SAT) score of at least 1000, an ACT score of at least 19, or a minimum Cumulative Grade Point Average (GPA) of 3.0. Applicants currently enrolled in a college or university must also have a minimum Cumulative GPA of 3.0.
2. Must be enrolled or accepted for enrollment in a college or university. Written proof of acceptance is required and must be included with this application.
 - Drilling Guard members may be half-time (minimum 6 semester hours) or full-time (12 semester hours). *Guard members enrolled half-time are eligible for \$1,000 scholarships ONLY.*
 - Family members must be full-time (12 semester hours).
3. Must be of good character, moral and personal traits.

4. Applicants should have some academic, athletic or community service honor.

*** * *** **For Vocational or Business Schools (Technical College System)**

1. Applicant must meet program specific admission standards and institutional requirements and complete all admissions procedures for admission to a degree/diploma program in REGULAR PROGRAM ADMISSION STATUS.
2. Must be enrolled or accepted for enrollment. Written proof of acceptance is required and must be included with this application.
 - Drilling Guard members may be half-time (minimum 6 semester hours) or full-time (12 semester hours). *Guard members enrolled half-time are eligible for \$1,000 scholarships ONLY.*
3. Must be of good character, moral and personal traits.

*** * *** **For Graduate or Doctoral Schools (Currently serving Georgia National Guard members Only)**

1. Applicant must be currently enrolled or accepted for enrollment as a graduate student in a college or university. Individual must have a minimum 3.0 Cumulative GPA as an undergraduate and maintain a 3.0 GPA in graduate school. Written proof of acceptance or enrollment is required and must accompany this application.
2. Be of good character, moral and personal traits.

*****APPLICATIONS ARE ACCEPTED FROM JANUARY 1ST – APRIL 15TH OF EACH YEAR. ALL APPLICATIONS AND SUPPORTING DOCUMENTATION MUST BE POSTMARKED NO LATER THAN APRIL 15TH OF EACH YEAR. ANY APPLICATION (OR SUPPORTING DOCUMENT) POSTMARKED AFTER APRIL 15th WILL NOT BE CONSIDERED.**

ALL SCHOLARSHIPS WILL BE AWARDED IN THE SUMMER FOR THE FALL SEMESTER OF THAT YEAR. APPLICANTS WILL BE NOTIFIED, IN WRITING, BY THE GEORGIA GUARD INSURANCE TRUST OF THEIR SELECTION/NON-SELECTION AND THE AMOUNT OF SCHOLARSHIP AWARDED.

MAIL APPLICATIONS & SUPPORTING DOCUMENTATION TO:
GGIT - 3 CENTRAL PLAZA, #356 – ROME, GA 30161

**If you have any questions, you may call the GEORGIA GUARD INSURANCE TRUST
at 770-739-9651 or 1-800-229-1053**

GEORGIA GUARD INSURANCE TRUST SCHOLARSHIP FUND
APPLICATION

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OF THE NATIONAL GUARD OF GEORGIA

APPLICATION INFORMATION

NAME _____ SSN (LAST 4): _____
(LAST, FIRST, MI)
HOME ADDRESS: _____

(CITY) (STATE) (ZIP CODE)
TELEPHONE NUMBER: _____ BIRTH DATE: _____

NAME OF HIGH SCHOOL OR HOME SCHOOL: _____

ADDRESS OF HIGH SCHOOL OR HOME SCHOOL: _____

(CITY) (STATE) (ZIP CODE)

GRADUATION DATE: _____ CUMULATIVE GPA: _____ CLASS RANKING: _____

CURRENT STATUS OF APPLICANT: (*Check One*)
() High School () Home School () College/University () Vocational/Business () Graduate School
() Full Time () Part Time # of Semester Hours _____

If you are Currently Enrolled in College/University, Please Provide your current Cumulative Grade Point Average (GPA):

College/University Cumulative GPA _____ Vocational/Business Cumulative GPA _____
Graduate School Cumulative GPA _____

NAME AND ADDRESS OF SCHOOL ATTENDING OR PLANNING TO ATTEND: _____

HAVE YOU BEEN ACCEPTED FOR ENTRANCE? () YES () NO

ARE YOU CURRENTLY A MEMBER OF THE GEORGIA NATIONAL GUARD? () YES () NO

UNIT OF ASSIGNMENT: _____
RANK / PAY _____
GRADE _____

GGIT POLICY HOLDER INFORMATION

NAME OF POLICY HOLDER (IF APPLICANT IS CURRENT GUARD MEMBER, PLEASE SKIP & SIGN BELOW):

_____ RANK / PAY GRADE: _____

RELATIONSHIP TO APPLICANT: _____ SSN (LAST 4): _____
HOME ADDRESS (STREET / P O BOX): _____

(CITY) (STATE) (ZIP CODE)

UNIT OF ASSIGNMENT: _____

UNIT ADDRESS: _____

UNIT TELEPHONE NUMBER: _____

(SIGNATURE OF APPLICANT)

(DATE)

AGREEMENT OF INSURANCE WITH GGIT

I AGREE TO RETAIN AT LEAST \$10,000 OF LIFE INSURANCE WITH GGIT FOR A MINIMUM OF TWO (2) YEARS FOLLOWING COMPLETION OF THE SCHOOL YEAR FOR WHICH SCHOLARSHIP IS AWARDED.

(Signature of Policyholder)

(Date)

I HAVE PURCHASED OR RENEWED MY ASSOCIATION MEMBERSHIP FOR THE CURRENT YEAR:

() EANGGA - See EANGGA.COM OR () NGAGA – See NGAGA.ORG

Signature of Policyholder _____

(Date) _____

VERIFICATION OF INSURANCE WITH GGIT
(GGIT office will complete)

(PRINTED NAME OF POLICYHOLDER)

HAS THE FOLLOWING INSURANCE COVERAGE IN FORCE WITH THE GEORGIA GUARD INSURANCE TRUST:

Personal Life Insurance: _____ Dependent/Spouse Life Insurance: _____

(Signature of GGIT Official)

(DATE)

SUPPORTING DOCUMENTS THAT MUST ACCOMPANY APPLICATION

1. COMPLETED APPLICATION (THIS DOCUMENT), ALONG WITH THE FOLLOWING:
2. **CERTIFIED (OFFICIAL)** TRANSCRIPT OF HIGH SCHOOL OR HOME SCHOOL CREDITS FOR CURRENT HIGH SCHOOL STUDENTS. **CERTIFIED (OFFICIAL)** TRANSCRIPT OF CREDITS FROM INSTITUTION OF HIGHER LEARNING FOR APPLICANTS CURRENTLY ENROLLED IN COLLEGE/ UNIVERSITY/GRADUATE SCHOOL.
3. VERIFICATION OF SAT OR ACT SCORES (IF NOT INCLUDED ON TRANSCRIPT). ***THIS REQUIREMENT APPLIES TO CURRENT HIGH SCHOOL STUDENTS ONLY.
4. A ONE (1) PAGE, FIVE (5) PARAGRAPH THEME FROM APPLICANT WITH SPECIFIC FACTS STATING HIS/HER DESIRE TO CONTINUE HIS/HER EDUCATION. (EXAMPLE: (1) INTRODUCTION, (2) EXTRA CURRICULAR ACTIVITIES, (3) COMMUNITY INVOLVEMENT, (4) HOW YOUR EDUCATION WILL IMPROVE YOURSELF AND YOUR COMMUNITY, (5) CONCLUSION).
5. ONE (1) LETTER OF RECOMMENDATION VERIFYING THE APPLICANT’S GOOD CHARACTER, MORAL AND PERSONAL TRAITS (SHOULD BE FROM AN EMPLOYER, COMMUNITY LEADER, MINISTER, ETC.).
6. ONE (1) LETTER OF ACADEMIC REFERENCE (SHOULD BE FROM A PRINCIPAL, COUNSELOR, DEAN, PROFESSOR OR PARENT OF HOME SCHOOL STUDENT).
7. AGREEMENT TO KEEP INSURANCE WITH GGIT AND AFFIRMATION OF ASSOCIATION MEMBERSHIP SIGNED BY POLICYHOLDER (THIS DOCUMENT).
8. VERIFICATION FROM THE GGIT OFFICE THAT INSURANCE WITH GGIT IS IN FORCE. (WILL BE COMPLETED BY GGIT OFFICIAL) (THIS DOCUMENT).
9. PROOF OF ACCEPTANCE FOR ADMISSION OR GOOD STANDING AT INSTITUTION OF HIGHER LEARNING WHICH APPLICANT WILL ATTEND OR IS ATTENDING.
10. FOR GRADUATE/DOCTORAL SCHOOL: ESTIMATED COST PER COURSE/QUARTER/SEMESTER AND EXPECTED DATE OF COMPLETION OF STUDIES.