

## Scholarship Applicant Information

Anticipated Graduation Date:

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	First Name:	MI.	Last Name			
	Street Address:					
	City:					
	Telephone:					
	Date of Birth:					
	Are you a citizen or permanent resident of the United States? Yes No  Are you a child of an Active, Retired, or Gold Star member of the United States Military? Y/N  Are you a child of an Active or Retired National Guards or Reservists? Y/N					
	If yes, Name of the Family Member:					
	Relationship to Applicant:					
	Branch of the Military:					
	Station (If Active): Please check the correct box  Active Retired Gold Address (If Different from Above):					
	Number of Siblings (including yourself) attending					
	Have you previously been awarded a scholarship from Barber Family Foundation? (If yes, indicate the year):					
High	School Information					
	Name of School:					
	City:					
			ation Date:			
	Dates Attended:					
	Name of Counselor:					
	Counselor's Email:	Couns	elor's Phone:			
	ergraduate Information garding the institution for which you are requesting scholarship assis					
	Name of College/University:					
	City:	_ State:				
	Major:	_ Minor:				
Current GPA:						



## **Previous Educational Information**

Name of School:		
City:	State:	
Field of Study:	Degree/Diploma:	
GPA:		
Dates Attended:		
curricular Activities a	nd Community Service	
Please list the groups to which y	you currently belong and your role:	
	ular activities, community involvement and	d volunteer experiences
Please list your past extracurric		
		Years Involved
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## **Essay Question**



In 500 words or less, please answer one of the following essay questions. If you previously submitted an application, please choose a new question to answer.

- 1. What will you need to do to finance your college education?
- 2. What in your background has helped shape the type of person you want to become?
- 3. What has been the most challenging aspect of being a child of a military service member?

## **Additional Comments**

Please list any additional information that the Scholarship Committee might find useful in evaluating your Application:
I certify that the information contained in this Application is true and complete to the best of my knowledge, information and belief.
Signature: Date:
REQUIRED UPLOADS OR DOCUMENTS TO BE SUPPLIED BY YOU
Essay Question Filed Tax Return (First 2 Pages) Proof of Military Affiliation
College Acceptance Letter (high school seniors only) Unofficial Transcript (college students only) 30 - 60 Second Video describing what it would mean to you to receive a BFF scholarship
REQUIRED OUTSIDE DOCUMENT CHECKLIST:
Professor Recommendation (college students only) School Counselor Recommendation (high school seniors only) School Transcript (high school guidance counselors)

You may submit your application and required documents online at www.mybff.org. Please ensure that your application, including all documents, are submitted by 11:59 P.M., EST on March 15, 2025. Any requested outside documents may also be mailed to Barber Family Foundation, P.O. Box 220983, Chantilly, VA 20153 in time to be received by March 15, 2025. Any incomplete application, or application received after this date, will not be considered.

If mailing, please submit this form, along with all required documents to Barber Family Foundation, P.O. Box 220983, Chantilly, VA 20153. Please ensure that both your application and all required documents, including those required outside documents, are received by us by 11:59 P.M., EST, on March 15, 2025. Any incomplete application, or application received after this date, will not be considered.

Before submitting your application, please review our eligibility criteria at mybff.org. At a minimum, you must be a child of an Active Duty, Gold Star, or Retired Service member who will be attending college on a full-time basis in the Fall of 2025. The complete list of instructions and criteria can again be found at mybff.org.