



Virginia War Memorial Marocchi Memorial Scholarship

MAROCCHI MEMORIAL SCHOLARSHIP APPLICATION – High School

All materials must be received by Monday, April 29, 2024, 11:59 p.m.

Name: _____

Phone Number: _____ Email (personal email preferred): _____

Home Address: _____

School name and district (county/city): _____

Counselor: _____

Counselor's phone AND email: _____

College/University you will attend: _____

ROTC Branch of Service: _____ Anticipated date of graduation from HS: _____

Type of Diploma (Standard, College Prep, Advanced, etc.): _____

Extracurricular activities: (include number of years of participation - clubs, athletics, academic societies, etc.): _____

Community Service Activities: (include number of years of participation - Scouts, 4H, Volunteer Fire/EMS, etc.): _____



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In 500 words or less, describe the reasons why you wish to pursue a career in the military services, and the personal benefits you hope to reap from your pursuit of higher education through ROTC (*please attach this description as a separate page to this application*).

Is there anything else you would like us to know about you? _____

I certify that all information contained in this application and all attachments thereto is true and correct to the best of my knowledge.

Signature

Date

If under the age of 18 at the time of signing, signature of parent or guardian.

Signature of Parent/Guardian

Date