



Davis Monthan Spouses' Club SPOUSE SCHOLARSHIP APPLICATION - 2026

THE PROGRAM

- The Scholarship Program of the Davis Monthan Spouses' Club (DMSC) supports military spouses, as well as graduating high school students, in our Davis-Monthan and wider Pima County military community, in their educational pursuits.
- This is the application for military spouses.
- One or more spouse applicants who are pursuing vocational, trade, or technical programs will be selected for a scholarship **AND** one or more spouse applicants who are pursuing undergraduate or graduate degrees will also be selected for a separate scholarship.
- Questions regarding the scholarship program should be sent to **scholarships@davismonthansc.org**

ELIGIBILITY REQUIREMENTS

Applicants must meet the following requirements:

- A spouse of one of the following:
 - Active duty, retired or deceased member of the U.S. Armed Forces, any rank.
 - Full-time National Guard or Reserve member, either active or retired, any rank.
- Applicant's sponsor must reside in Pima County, Arizona at the time of application.
- If the applicant's sponsor is deceased, the applicant may not have remarried and must reside in Pima County, Arizona at the time of application.
- Active or retired military members themselves are not eligible to apply.
- Spouses applying for this scholarship must plan to attend an accredited school or college during the 2026-2027 academic year. Spouses may be full- or part-time students, but scholarship funds cannot be used past the 2026-2027 academic year.
- Applicant and sponsor must both possess military identification cards valid through **May 31, 2026**.

SELECTION CRITERIA

- All applications submitted on time in their entirety will be scored by the Scholarship Scoring Committee. No personal information will be seen by the Scoring Committee.
- Scores are based on demonstrated leadership and participation in community activities, work experience, academic achievement, essay, and an outside appraisal.
- Scholarships are granted without regard to military member's rank, or applicant's race, creed, religion, sexual orientation, gender, disability, or national origin.

KEEP THIS SHEET FOR YOUR RECORDS

AWARDS

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- The amount of total funds available to the DMSC Scholarship Program is dependent on income from the Davis Monthan Thrift Shop, other fundraising efforts, and community donors.
- There will be several scholarships, \$750 and greater, awarded.
- Applicants will be notified by email, in April, whether or not they are a scholarship recipient.

LIMITATIONS

- Scholarship funds must be used within the 2026-2027 academic year for full- or part-time study. Scholarships cannot be deferred for any reason.
- Scholarship funds are to be primarily used for qualified educational expenses such as tuition, fees and required books and equipment (see IRS Publication 970). The recipient is liable for any tax that may result from the scholarship.
- Awards are limited to qualified educational expenses not covered by Military Spouse Career Advancement Accounts (MyCAA) or GI Bill Benefits.
- Scholarship funds cannot be used for previously established debts or bills, penalty fees or disenrollment fees.
- Payment of the scholarship funds will be made directly to the student's school upon the student's submission of proof of enrollment. No scholarship funds will be paid directly to the student under any circumstances.
- Applicants accepting a full ROTC scholarship or any full scholarship which pays 100% of tuition, fees, and books will not be able to accept a DMSC scholarship award.
- DMSC Scholarship Scoring Committee members are not eligible to apply.
- Applicants may only receive one general education award from a spouses' club, local or national
- **Applicants may not have accepted a scholarship from the DMSC in a previous academic year.**

REVISIONS

- The DMSC reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time, including termination of the program.

APPLICATION INSTRUCTIONS

- Interested spouses must complete all parts of the current year application and email it no later than **March 31, 2026**.
- All parts of the application must be submitted on time; if any part is not included, the application will not be evaluated.
- Signatures must be original, not electronic.
- Additional pages for parts 5-6 may be printed if space is needed for more activities.
- A résumé or summary of activities and achievements does not replace any part of the application and will not be reviewed. Letters of recommendation will not be reviewed.
- Once submitted, the application becomes the property of the DMSC Scholarship Program. DMSC will do everything possible to protect personal information and will destroy the documents within 2 years. The Scholarship Scoring Committee will be blinded to names and personal information.

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Photo Release Form

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I, _____, hereby give consent to the Davis Monthan Spouses' Club, its directors, trustees, officers, or designees to use my name and likeness in its promotional materials, including but not limited to printed materials, its website and electronic media and I further consent to and authorize that the Davis Monthan Spouses' Club may notify various media (including local newspaper, TV, radio and online news outlets) of the award of a scholarship to me as well as information concerning such an award including the name of my hometown and the educational institution that I will be attending.

I give consent

I do not give consent

Signature of Applicant: _____

Date: _____

APPLICATION CHECKLIST

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Your application is complete only when Parts 1 – 7 have been received by email.
 Your application must be emailed by **March 31, 2026**.

Part 1	Eligibility Form - <i>applicant OR sponsor must present valid military identification card to notary</i>
Part 2	Applicant Appraisal - <i>by non-relative adult</i>
Part 3	Signed Certification
Part 4	Personal and Academic Data Sheet - <i>transcript required</i>
Part 5	Employment and Community Participation
Part 6	Awards and Honors
Part 7	Applicant Essay
Email	Email completed application to: scholarships@davismonthansc.org
SEND ALL APPLICATION MATERIALS IN ONE EMAIL, IF POSSIBLE. PLEASE INCLUDE YOUR NAME IN THE EMAIL SUBJECT LINE.	
EMAIL DEADLINE: March 31, 2026	

PART 1
Eligibility Form

***BOTH the applicant and sponsor must verify their eligibility by initialing the statements.
 EITHER the applicant or sponsor must obtain a notarized signature. Provide the notary with your
 military ID card as identification.***

____/____ We, the applicant and sponsor, recognize the necessity of determining applicant's eligibility for a DMSC Scholarship. We understand that failure to provide proof of eligibility, when requested, will result in denial of a scholarship.



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___/___ Scholarship applicant is a dependent of an active duty, retired or deceased member of the U.S. Armed Forces, or full-time National Guard or Reserve member, either active or retired. If the sponsor is deceased, the applicant has not remarried.

___/___ Scholarship applicant is not an active or retired military member.

___/___ Scholarship applicant and sponsor (if applicable) reside in Pima County, Arizona.

___/___ The applicant has not previously received an award from the DMSC Scholarship Committee.

STOP: Signature must be notarize

Signature of Applicant or Sponsor _____ Date _____

Notary: Use either the United States Uniformed Services Identification and Privilege Card (Military ID) or United States Government Geneva Conventions Identification Card (Military ID) as identification when notarizing the signature above.

Expiration date of the identification provided: _____

U.S. Armed Forces or State of Arizona, County of _____

On this ___ day of _____, 20___, before me personally appeared

_____(name of signer), whose identity was proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledged that he/she signed the above document. (seal)

Notary Public

PART 2
Applicant Appraisal

To the Applicant: This section is required and must be in the format provided. If this section is not received, your application will not be evaluated. This section is to be completed by someone not related to you. That adult should know you well, such as a colleague or supervisor, volunteer associate, or school advisor.

To the Appraiser: You are being asked to provide information in support of this scholarship applicant. Please indicate your responses to the following statements and complete the Comments section. When complete, please email this form to scholarships@davismonthansc.org. Please include the applicant's



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name in the email subject line. All application materials must be emailed by **March 31, 2026**. Thank you!

APPLICANT'S NAME: _____

The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

Comments: _____

Appraiser's Name _____ Telephone (____) _____

Title _____ Organization _____

Appraiser's Signature _____

Date _____

PART 3
Signed Certification

I certify that I have read and understand the Limitations and Application Instructions on page 2.

I certify that the information in this application is complete and accurate to the best of my knowledge.

My essay is entirely my own effort.

I am a responsible citizen in good standing in my community.



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I will provide verification of an honor/award or of participation in an activity, if requested by the DMSC Scholarship Chairperson.

If I am a scholarship recipient, I will complete, sign and email the Acceptance of Award form by **July 1, 2026**.

I will provide verification of enrollment from my school to the DMSC Scholarship Chairperson by **October 1, 2026** (scholarships@davismonthansc.org).

It is my responsibility to notify the Scholarship Chairperson of any change of status (e.g. change in address, email address, school plans, etc.).

If I do not meet these requirements, my scholarship award may be forfeited.

APPLICANT SIGNATURE: _____ **DATE:** _____

PART 4
Personal and Academic Data Sheet

APPLICANT'S INFORMATION

Applicant Name (Last, first, middle)

Home Address	County in AZ
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Applicant Cell Phone	Alternate Phone Contact
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Applicant Email address

SPONSOR'S INFORMATION

Sponsor's Eligibility Category (Check one)



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<input type="checkbox"/> Active Duty	<input type="checkbox"/> Armed Forces Retired	<input type="checkbox"/> Armed Forces Deceased
<input type="checkbox"/> Full-time Reserve	<input type="checkbox"/> Retired Reserve	<input type="checkbox"/> Full-time National Guard
<input type="checkbox"/> Retired National Guard		
Sponsor's Name and Rank		Relationship to applicant
Sponsor's Branch of Service		E-mail address
Sponsor's Organization		Sponsor's Duty Phone
Sponsor's Duty Address		Sponsor's Home Address

SCHOOL HISTORY

High School and Post-Secondary Schools Attended Name of School, City, State/Country	Dates Attended	GPA	Program/ Degree Completed	Transcript Attached (instructions below)
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

TRANSCRIPTS AND TEST SCORES (REQUIRED) - read instructions carefully and email documents

*A transcript from your current or most recent school is required to complete your application. If you have no post-secondary education, then attach your high school transcript. If you have completed only one term of post-secondary education, then attach your transcript from that term **AND** your high school transcript.*

An unofficial transcript is acceptable, but please make sure it is a complete transcript and easy to interpret.

Please report your test scores (optional).
 Also, email the paperwork that states your name and test score.

SAT score: _____

ACT score: _____



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GRE score: _____

I did not take any of these standardized tests in the past 5 years.

CONTINUING EDUCATION PLANS

Indicate and describe which type of education program you are pursuing during the 2026-2027 academic year.

- Vocational, Trade, or Technical Program. Certificate/Diploma/License in _____
- Associate of _____
- Bachelor of _____ in _____
- Postgraduate _____
- Other _____

List the full name and location of the post-secondary school(s) you plan to attend, and your current enrollment status.

School Name and Location (no abbreviations)	Currently Enrolled	Accepted	Applied
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GOALS AND ASPIRATIONS



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Please briefly describe your educational and career plans.

{Optional}

Please tell us how you learned about this scholarship program. Do not use names of any individuals.

PART 5

Employment and Community Participation

*Please give reasonable estimates if you do not have a record of your hours.
If you do not provide total hours, no credit will be given for the activity.
Copy/duplicate this page if more space is needed.*

WORK EXPERIENCE List jobs or internships you have held in the last 4 years. Include hours through March 31, 2026.

Employer (Name, Location)	Position Description	Paid	Dates Employed	Total Hrs
		<input type="checkbox"/>		
		<input type="checkbox"/>		



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		<input type="checkbox"/>		
		<input type="checkbox"/>		

COMMUNITY / VOLUNTEER SERVICE Describe your involvement with organizations, associations, clubs, or other community activities over the last four years. Place a descriptive symbol of your position, if applicable, and report the hours you spent doing community volunteer service.

P-President **VP**- Vice President **C**-Captain **M**-Member **O**-Other, please state position
S-Secretary **T**-Treasurer

Organization or Community Service Project (Name, City, State & description of organization and your role)	Position	Dates Participated	Volunteer Hours
<i>e.g., Casa de los Ninos, Tucson, Reading tutor for children, 3 hours/week</i>		<i>07/16 – present</i>	<i>250</i>
<i>e.g., Tyndall AFB Enlisted Spouses Association, Panama City, FL. Maintained books, attended board meetings, managed funds and participated in social and fundraising events</i>	T	<i>08/14 – 06/16</i>	<i>90</i>

**PART 6
Awards and Honors**

AWARDS, HONORS, & ACHIEVEMENTS From the last four years, list your most selective achievements first, then other significant recognitions. Give a detailed description of each. List no more than 8 items.

Description and Scope of Award/Honor/Achievement	Awarding Organization and Date



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END. Maximum 8	

UNUSUAL CIRCUMSTANCES (OPTIONAL):

If you feel that some unusual personal, family, or military-related challenge in your life has kept you from gaining more work or volunteer experience, participating in more activities, or achieving even greater academic success, we would like to hear about your situation. The Scoring Committee will consider your response when reviewing your overall package. *Do not write your name or any other identifying details.*

PART 7
Applicant Essay

Submit a copy via email to scholarships@davismonthansc.org with your scholarship application.

Please write an essay with ONE of the following prompts (include prompt title):

- Tell about a time when you had a belief or idea challenged. What prompted your thinking? What was the outcome?***

OR

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2. *Discuss an accomplishment, event, or realization that sparked a period of personal growth and a new understanding of yourself or others.*

Essay Instructions:

- Essay must be typed and double-spaced.
- Essay must be entirely your own work.
- Essay should be 400 - 600 words. Place the word count at the end of the essay.
- **DO NOT USE YOUR NAME, SCHOOL NAME OR OTHER IDENTIFIERS IN THE ESSAY.**
- Your essay score will be based on how well you do in the following areas:
 - Engaging the reader with voice and word choice, addressing the prompt with an appropriate idea, overall organization, use of transitions, relevance of content, use of writing strategies (concrete details, compare and contrast, etc.), use of the English language (word usage and spelling, sentence structure, grammar), and following word count and other essay instructions.