

SEAWOLF ASSOCIATION

APPLICATION FOR EDUCATIONAL ASSISTANCE GRANT

Please submit this form to the Educational Assistance Board along with the required essay on this year's topic. Applicants are limited to undergraduates or students enrolled in "trade schools" approved by the EAF Coordinator. The completed package must be submitted no later than July 31st of this year to be eligible for participation in the competition for that school year.

1.	Name:SSN:		N:	
	Address:			
	City:	State:	ZIP:	
	Phone-Home:			
	Date of Birth:	Marital Status:		
2.	Date you enrolled (or exp	Date you enrolled (or expect to enroll) in college:		
3.	Expected graduation or course completion date:			
I he	reby certify that my	HA(L)-3 CONNECTION ationship), (Name)	,	
Serv	ved with HA(L)-3,(Det/Ar	RVN from, RVN from	to	
	Regular or Life Member of the Se	eawolf HA(L)-3 Association		
	Regular or Life Member at the time of Death			
accu		from the SEAWOLF ASSOCIATION	rmation provided herein is complete and DN shall be used only for expenses related	
	(Signature of Student Ap	plicant)	(Date)	
	(Signature of Parent or G	uardian)	(Date)	