



NATIONAL THIRD VICE COMMANDER PROGRAM

THOMAS J. CUITE SCHOLARSHIP FOUNDATION RULES

(Eligibility - High School Seniors)

PURPOSE OF THE FOUNDATION

Our Scholarship Foundation has been established to perpetuate the aims and ideals of the Catholic War Veterans by rendering financial assistance and by encouraging the Catholic youth of our nation to seek greater achievement through higher education. Many ambitious and deserving boys and girls have benefited from our programs. Whatever your dreams of the future may be, whatever career you may decide to follow, we hope we can start you on your journey. It has been named the Thomas J. Cuite Memorial Scholarship in honor of our beloved Past National Commander.

ELIGIBILITY

Any high school senior is eligible if his/her parent or grandparent is a member of the Catholic War Veterans or if he/she is a child or grandchild of a deceased Catholic veteran.

SCHOLARSHIP GRANT

Four recipients will receive \$1,000 award grants per administrative year -- payment to be made in **two \$500 installments (1st & 2nd semesters)**. Applicants must be entering an accredited college or university.

HOW TO APPLY

1. Applications may be obtained by writing to National Headquarters or downloaded off the National website. The application must be completely filled out and signed by both the candidate and the parent or guardian. Poorly completed applications may jeopardize their competitiveness.
2. **Prepare portfolio containing:**
 - a. **Completed application**
 - b. **Sealed secondary-school record from your high school principal**
 - c. **Sealed scholarship rating or recommendations by your teacher.**
3. Submit the sealed portfolio to your local Catholic War Veterans Post no later than **May 20.**

OVER, please...

SELECTION OF WINNER

1. The Post Third Vice Commander shall verify membership or qualification and shall forward all portfolios to National Third Vice Commander no later than **June 1.**
2. The National Third Vice Commander shall give careful consideration in selecting the best qualified candidates based on:
 - A. High academic records indicating a strong potential for success on the college level.
 - B. Service to the high school, initiative and leadership displayed and participation in other activities.
 - C. Financial needs.

The National Board of Officers at a National Board Meeting will ratify the decision of the judges. National Headquarters will notify the winners. **The decision of the Board shall be final.**

The **Catholic War Veterans Thomas J. Cuite National Scholarship Foundation** cordially invites all echelons to encourage qualified high school seniors to participate in this annual program, which is financed through donations received from the various echelons and the membership at large.

PLEASE DIRECT ALL

QUESTIONS TO:

CATHOLIC WAR VETERANS, USA

703-549-3622

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THOMAS J. CUITE MEMORIAL SCHOLARSHIP APPLICATION

(DEADLINE FOR SUBMISSION TO NATIONAL – June 1)

(Revised 29 July 2003)

Any high school senior is eligible if his/her parent or grandparent is a member of the Catholic War Veterans or if he/she is a child or grandchild of a deceased Catholic veteran. Four \$1,000.00 scholarships will be awarded per administrative year. Payment will be made in two \$500 installments (1st & 2nd semesters). (Per motion approved at 26-27 Jan. 2001 National Board Meeting – page 7)

Please supply all information requested on this form. **TYPE** the information and use additional sheets of paper, if necessary. You and your parent or guardian must sign the form. Attach application and your Secondary-School Record (to be completed by the principal of your high school) and **submit to your local CWV Post by MAY 20.**

SELECTION OF WINNER

The National Third Vice Commander shall give careful consideration in selecting the best qualified candidates based on:

- a. High academic records indicating a strong potential for success on the college level
- b. Service to the high school, initiative and leadership displayed, and participation in other activities
- c. Financial needs.

1. Name: _____
(Last) (First) (Middle)

2. Address: _____

3. Social Security Number: _____

4. High School: _____

Address: _____

5. Principal's Name: _____

6. Age: _____ Date of Birth: _____ Sex: _____ Graduation Date: _____

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7. Name & Address of College you plan to attend:

Date of Entry (Month & Year): _____

8. Career Objective: _____

9. Have you taken college SAT and/or ACT?
If so, when? _____
If not, why? _____

10. Do you plan a four year program? _____

11. Class & extra curricular activities during the past two years:
(Indicate offices held) _____

12. Probable college major: _____

13. Prizes, awards, honors, scholarships, other recognitions received in the past two years:

14. Hobbies or interests: _____

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15. Have you applied for other college scholarships? _____

If so, list names and amounts & indicate any already approved:

16. Have you been accepted by a college?

If so, give name: _____

17. Indicate amount of money you expect to be available for your first year of college from:

Family: _____

Your savings: _____

Other scholarships: _____

18. How do you plan to meet other expenses: _____

19. Jobs held in the past two years, show income from each:

20. Number and ages of brothers and sisters:

Number in college: _____

***THE FOLLOWING INFORMATION MUST BE SUPPLIED
BY THE APPLICANTS PARENT OR GUARDIAN***

Name: _____

Address: _____

Relationship to applicant: _____

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Occupation: _____

Business address: _____

Parent's ability to assist (financially), if so, to what degree:

Mother/father or grandparent's date of entry into service: _____

(a) Serial number: _____

(b) Date of discharge: _____

(c) Rank at time of discharge: _____

If deceased, date and place of death: _____

Was death due to service-connected disability? _____

Medals or citations awarded (this will not affect the selection of winners):

The above information pertains to:

Mother Father Grandparent

Applicant's Baptismal Record:

Date & Church: _____

Applicant's Confirmation Record:

Date & Church: _____

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Sponsoring CWV Post: _____

Post Commander: _____
(Name)

(Address)

(Telephone/Include Area Code)

I certify that to the best of my present knowledge, all information given is true and correct.

(Signature of Applicant)

(Signature of Parent or Guardian)

Date: _____

Date: _____

DEADLINE DATES:

Return to local Post by MAY 20

Post must return to National by JUNE 1

**CHECK TO ENSURE APPLICATION IS
COMPLETE AND RETURN TO:**

***CATHOLIC WAR VETERANS, USA, INC.
441 NORTH LEE STREET
ALEXANDRIA, VA 22314***

