



E T Brisson Detachment #063
Marine Corps League of Naples
 PO Box 8971, Naples, FL 34101
www.MarineCorpsLeagueNaples.com

HAROLD "PAPPY" WAGNER MEMORIAL SCHOLARSHIP APPLICATION

Today's Date: _____ Year applying for Scholarship: _____

APPLICANT INFORMATION [Please PRINT]

Name of Applicant: LAST _____ FIRST _____ MI _____

Address: _____

City: _____ State: **FL** Zip: _____

Phone #: _____ Email: _____

Name of Institution to which you intend to apply: _____

High School graduating from: _____

Graduation Date: _____

SPONSOR'S RELATIONSHIP TO APPLICANT

Check one: Father _____ Mother _____ Grandparent _____

Name of Sponsor: LAST _____ FIRST _____ MI _____

Years served in the Marine Corps: From: _____ To: _____

Sponsor's Phone #: _____ Email: _____

● **SUPPORTING DOCUMENTATION REQUIRED:**

- Academic Record: copy of most up-to-date Transcript
- Proof of USMC or FMF Corpsman lineage: copy of Sponsor's DD214
- Letter of Recommendation attesting to leadership abilities
- Applicant's Essay on why he/she is deserving of this Scholarship [75-100 words]

Attach supporting criteria documents to Application and mail by **MARCH 31st** to:

NCOIC Bill Flaishans
 ET Brisson Detachment 063
 PO Box 8971
 Naples, FL 34101

DETACHMENT SCHOLARSHIP NCOIC CERTIFICATION

● Criteria met: _____ YES _____ NO

● NCOIC Signature: _____