

9th Annual Jim Ziegler Scholarship Application

North Dakota Vietnam Veterans of America
and Associate Vietnam Veterans of America

Name of Applicant _____
Mailing Address _____
City, State, and Zip Code _____
Telephone Number _____ Date of Birth _____
Signature of Applicant _____

Relationship of applicant to VVA or AVVA member
Self ___ Spouse ___ Child ___ Grandchild ___ Dependent ___

VVA or AVVA members name and membership number.
Name _____ Membership Number _____

EDUCATION

Name of High School _____ Graduation
Date _____
Mailing Address _____
City, State, & Zip Code _____
College or vocational School you plan to attend.
Name of School _____
Mailing address _____
City, State, & Zip Code _____
Area of Study _____

The processing of applications and selection of award is within the sole discretion of The North Dakota Vietnam Veterans of America and the North Dakota Associate Vietnam Veterans of America and is not subject to appeal or review.

Mail applications before April 15, 2010 to:
AVVA, 339 Center Ave. S., Mayville, ND 58257-1311