

National Naval Officers Association



Washington, DC Chapter
*** 2025 Scholarship Awards Program ***

INTRODUCTION

Founded in 1972, the National Naval Officers Association (NNOA) is comprised of officers from the Coast Guard, the Navy, and the Marine Corps – the nation's Sea Services. NNOA provides professional development and mentoring in an effort to recruit, promote, and retain minority officers in the Sea Services. NNOA seeks to strengthen a diverse officer corps to enhance operational readiness in the Sea Services and has a long history of providing a positive image of the Sea Services in minority communities and educational institutions.

Each year, the Washington, DC Chapter of the NNOA (DCNNOA) awards scholarships starting at \$1,000 to minority youth from the Washington, DC Metropolitan Area based on academic achievement, positive community involvement, commitment, and financial need. Scholarship recipients select their major and attend the college or university of their choice without any obligation to join or affiliate with the military.

INSTRUCTIONS

Students must submit a **COMPLETE** application package (details below) verified by their counselor by **February 21 28, 2025** in order to be considered for a scholarship. **Submit your application online** @ https://nnoa.org/chapter-dcnnoa/. After submitting your online application, you will receive an email confirmation. **Forward your email confirmation to your counselor for verification.** Please e-mail both stephen.b.williams10.civ@us.navy.mil and rab94usa@gmail.com with any questions or issues.

A **COMPLETE** application package consists of:

- Online application submission
- Supporting documents (all attachment filenames must begin with student last name):
 - Transcript and/or SAT/ACT score report
 - A listing of extracurricular activities, community service activities, academic honors, and positions of leadership (.doc or .pdf format)
 - Statement of financial need and/or special circumstances/compelling situation (limit 1 page)
 - Two (2) letters of recommendation from school officials or other persons of influence in life, other than relatives, who are in a position to address character, citizenship, and leadership
 - Recent photograph (wallet size, high quality if possible) (cropping a photo ID counts)
 - Short BIO (Name, Age, Hometown, College you plan to attend w/ Major, future goals/aspirations)

NOTE: Students selected to receive a DCNNOA scholarship will be notified directly via telephone call. Please ensure an active telephone number and email are listed for you in your application.

Students selected to receive one of DCNNOA's scholarships will be announced on this homepage https://nnoa.org/chapter-dcnnoa/. These scholarships are intended to support the recipients during their freshman year of college. Recipients must enroll full-time at a two or four-year accredited college or university for scholarship funds to be deposited with that institution for the recipient's use. **Enrollment verification must be submitted to** reed_michele@ymail.com **by August 2025**. Scholarship funds will not be deposited until the end of August 2025. The Scholarship Program Chairman is LCDR Stephen Williams, USN (Retired) who can be reached at (703) 695-8664 / (703) 644-2605) / Fax (703) 644-8503 or via email at stephen.b.williams10.civ@us.navy.mil. Please include CDR Rich Borden, USN (Retired) ((757) 769-5700, rab94usa@gmail.com) on all scholarship emails to the Chairman.



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Scholarship Application Template For reference only. Application data must be submitted ONLINE.

PRIVACY ACT STATEMENT

Authority to request this information is derived from 5 United States Code 301, Departmental Regulation. The purpose of the information is to apply for educational financial assistance through the Washington, DC Chapter of the National Naval Officers Association (NNOA) Scholarship Awards Program. Information provided will be used to assess scholastic achievement and financial need. A complete package is mandatory. Failure to provide required (*) information might result in disqualification from participation in the Scholarship Program.

PERSONAL INFORMA	TION						
Applicant's Last Name*		Applicant's First Name*			Applicant's Middle Name (if any)		
Home Address		City			ze Zip		
Home Phone		Ilular Phone * Email A			e *		
Yes No	· ·	Male Fema		iuui 03.	•		
U.S. Citizen or Permanent Resident	?* (circle one)	Gender (circle one)	Ethnici	ty *			
Parent/Guardian's Full Name*		Parent/Guardian's Email*			Parent/Guardian's Cell Phone*		
Parent/Guardian's Full Name		Parent/Guardian's Email			Parent/Guardian's Cell Phone		
HIGH SCHOOL INFOR	MATION						
Name					Phone Number		
Address		City			State Zip		
HIGH SCHOOL TRANS	SCRIPT SUMM	ARY					
From: To:							
Dates of Attendance*		Cumulative GPA*	Class Rank (if applicable)	Class Size		
SAT Math Score	SAT Verbal Score	SAT Writing Score			Test Date		
ACT Composite Score					Test Date		
Guidance Counselor's Last Name*		Guidance Counselor's First Name*			Email Address*		
Guidance Counselor's Signature (for	verification of application	n data)					



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ADDITIONAL REQUESTED INFO	RMATION									
Are you an Eagle Scout, currently active in the ** Note: Proof of Eagle Scout status must be s	Yes	No								
Are you a member of a STEM organization suc Technology Training Center? If yes, list the org	Yes	No								
Would you be willing to apply for a competitive	Yes	No								
Are you a member of a Junior Reserve Officer	Yes	No								
Do you have a disability? State the disability	Yes	No								
COLLEGE ENROLLMENT INTEN										
EXPECTED MAJOR OR COURSE OF STUDY	PRIMARY									
	SECONDARY									
DO YOU PLAN TO ATTEND AN HBCU? (circle of ** NOTE: HBCU enrollment must be verified to	Yes	No								
DO YOU PLAN TO ENROLL IN AN NROTC UNIT ** NOTE: NROTC enrollment must be verified to	Yes	No								
COLLEGES TO WHICH APPLICANT HAS APPLIED										
College Name			Financial Aid	Office Phone Nu	mber					
Financial Aid Office Address	City		State	Zip						
College Name	Financial Aid	Financial Aid Office Phone Number								
Financial Aid Office Address		State	Zip							
Timanotal / tid Office / tidal coo		Otato								
College Name			Financial Aid	Office Phone Nu	mber					
Financial Aid Office Address	City		State	Zip						
GRADUATING SENIORS AWAR	DS CEREMO	ONY								
School's ceremony point of contact's name:										
School's ceremony point of contact's phone no										
School's ceremony point of contact's email address:										
Ceremony date (if known):										
APPLICANT CICHATUPE										
APPLICANT SIGNATURE (I certify the data provided in this application is true and accurate to the best of my knowledge):										
ONLINE SUBMISSIONS ONLY Date:										