



COMBATIVES ACADEMY

karate • grappling • kickboxing • mma

705 North Union Street
(Across from Boardman Park)
Olean, NY 14760 (716) 373-1050

Office Use Only
Received _____
Number _____
Interviewed _____

APPLICATION:

2013 Veterans Martial Arts Scholarship

- Criteria:** 1) Honorably Discharged/Released from Active Duty after March 31, 2008;
 2) Complete Application; 3) Brief essay of why you feel you should receive this scholarship;
 4) Copy of DD214; 5) Two Letters of Recommendation.

TYPE OR PRINT LEGIBLY

Name: _____ Age: _____ Date of Birth: _____

Address: _____

Phone Number(s): _____ email: _____

Branch(es) of Service: _____ Years Served: _____

Date(s) released/discharged from Active Duty: _____

Are you currently employed? _____ If yes, Where? _____

Education Level: _____ Schools Attended: _____

Do you have any martial arts experience? (none required) _____ If Yes, What & When?

Have you participated in any type of community service in the past? (none required) _____

If Yes, What? _____

Do you have any medical/health related issues that may affect your participating in martial arts training? _____ If so, what? _____

**** If you have any medical concerns that may affect your training, please provide a medical release from your physician. ****

I, _____, attest that the above and attached information is accurate.
(print name)

Signature: _____ Date: _____

Dates: Applications Due by March 15, 2013; Interviews for Finalist March 19-21, 2013
Announcement of Recipients by March 27, 2013

This Application may be copied if needed.

AKTCA-VMAS2013