

University of the Incarnate Word Veterans Scholarship Application

The Veterans Scholarship is made possible by the generosity and commitment of UIW's alumni and friends to offer scholarship awards to our veterans and/or veteran dependents. Applications may be submitted to the Military and Veteran Center via e-mail (military@uiwtx.edu), mail (4301 Broadway CPO 58, San Antonio, TX 78209) by July 12, 2024 for consideration.

Veterans Scholarship Eligibility Criteria:

Application Checklist:

- Must be an undergraduate or graduate student
- Must be in good academic standing, preference given to students with 3.25+ cumulative GPA
- Must identify under one of the following military affiliations:
 - Veterans and Dependents* either <u>not</u> utilizing or you have exhausted VA or TA benefits OR
 - Active Duty Military and Dependents* either <u>not</u> utilizing or you have exhausted VA or TA benefits **OR**
 - Reserve and National Guard and Dependents* either <u>not</u> utilizing or you have exhausted VA or TA benefits <u>OR</u>
 - o ROTC cadets <u>not</u> on military ROTC scholarship and either <u>not</u> utilizing or you have exhausted VA or TA benefits
 - * Dependent is defined as spouse or child of Veteran, Active Duty, Reserve, or National Guard

P	Proof of Military Affiliation Form					
	Complete the Attached Essay Questions					
\Box S	☐ Scholarship Release of Information Form					
□ P	□ Podcasting, Photographic, and Other Media Release Form					
☐ Thank You Letter						
	Complete the fillable thank you lette				W Veterans	s Scholarship
	Donor" expressing your sincere than	ks for the schol	larship opportun	ity.		
Student 1	Information:					
Name			UIW S	tudent ID		
Phone Nu	umber	Email _				
Permaner	nt Address					
	Street		City		State	Zip
Academic	c Major					
Minor/Co	oncentration (if applicable)			GPA (4.0) scale)	
Classifica	ation for 2023-2024 school year:	Freshman	Sophomore	Junior	Senior	Graduate
Student S	Signature				Date	



Proof of Military Affiliation

Veteran Connected Scholarship Application

Affiliation: (check all that apply)	
 □ Veteran □ Active Duty □ Veteran Dependent* □ Active Duty Dependent* □ ROTC □ Reserve □ National Guard □ Reserve Dependent* □ National Guard Dependent* * Dependent is defined as spouse or child of Active Duty, Reserve, National Guard, or Veteran 	
Branch of Service: Army Air Force Coast Guard Marine Corps Navy Space Force	
Examples of forms that can be submitted for proof of affiliation: Veteran: Form DD214 Veteran Dependent: Form DD214 from your spouse or parent/guardian Active Duty: Servicemembers Civil Relief Act (SCRA) Verification Form Active Duty Dependent: Servicemembers Civil Relief Act (SCRA) Verification Form from your spouse or parent/guardian	liar
ROTC: ROTC Verification Letter	



Student Name	UIW Student ID
Complete the following scholarship essay questi	ions:
 Thank you letter must be typed, signed and submitted What is an obstacle you have overcome to (Example – time management, balancing school 	pursue a college degree?
Why have you chosen your field of study a	and what are your future career plans/goals?
Why have you chosen to attend UIW and vacceptance to UIW, campus involvement, etc.)	what has been your most cherished UIW experience thus far? (Example – you
➤ What is your connection to the military?	
 Provide additional information you wish to 	o have considered (optional).



University of the Incarnate Word Scholarship Release of Information Form

The University of the Incarnate Word makes every effort to protect the privacy of your educational records. Scholarship donors very much appreciate knowing the students who directly benefit from their scholarship funds. By allowing the University to release your name, directory, and academic information, you are helping us to connect donors with our students. This simple act helps to ensure that more UIW students will continue to benefit from these generous gifts.

By sig	gning below, you indicate:				
	you authorize UIW to release your name, directory and academic information to scholarship donors in conjunction with any UIW scholarships you may receive				
<u>OR</u>					
	you do <u>not</u> authorize UIW to release your name, directory conjunction with any UIW scholarships you may receive.	and academic information to scholarsh	nip donors in		
Stude	nt Signature	Date			
	ed Name	UIW ID			

This form must be submitted with the UIW Veterans Scholarship Application. The application and all accompanying forms and documents must be submitted to the Military and Veteran Center by November 22, 2023.



PODCASTING, PHOTOGRAPHIC, AND OTHER MEDIA CONSENT AND RELEASE FORM

I authorize and grant to the University of the Incarnate Word (UIW), St. Anthony Catholic High School, Incarnate Word HighSchool, and UIW Prep, all of which are referred to collectively in this agreement as UIW, and those acting pursuant to its authority, a non-exclusive, perpetual, worldwide license to:

- 1. Record my participation, likeness and/or voice on a video, audio, photographic, digital, electronic, hosted media, web-based service or any other medium, including podcasting;
- 2. Use my recorded likeness and/or voice on a video, audio, photographic, digital, electronic, hosted media, web-basedservice or any other medium, including podcasting;
- 3. Use my name and identity in connection with these recordings;
- 4. Use, reproduce, exhibit, or distribute in any medium (e.g. print publications, video tapes, CD-ROM, Internet, podcast) my recorded likeness and/or voice on a video, audio, photographic, digital, electronic, or any other medium without restrictions or limitations for any educational or promotional purpose which UIW and those acting pursuant to its authority, deem appropriate, including promotional efforts.
- 5. Distribute the medium over the internet using formats that allow downloading and playback on mobile devices and personal computers, for the purpose of making the work available in any format through iTunes or other web-basedservice.
- 6. Make and maintain more than one copy (hard-copy and/or digital copy) of the work for purposes of security, back-upand preservation.

I release UIW and those acting pursuant to its authority, from liability for violation of any personal, intellectual (including copyright) or proprietary rights I may have in connection with uses of the recordings authorized above. To the extent required, I hereby grant and assign all copyright in the podcast, video, audio, photographic, digital, electronic, or any other medium utilized to UIW. I waive any right to inspect or approve the final use(s) of the video, audio, photographic, digital, electronic, podcast or any other medium. As to the video, audio, photographic, digital, electronic, podcast itself, or any other medium, I understand and agree that UIW shall have exclusive ownership of the copyright and other proprietary and propertyrights in the work.

I waive any rights, claims, or interests I may have to control the use of my likeness, voice, name, recordings, and/or identity in the recordings and podcasts authorized above. I agree that any uses described above may be made without compensation or additional consideration to me. I agree that UIW shall have the right to remove the work from the hosted media or web-based service at anytime without prior notice for any reason deemed to be in UIW's best interest.

I waive and release UIW and its officers, agents and employees from any claim or liability relating to the use of my name, likeness, identity, voice, photographic image, video graphic image and oral or recorded statements in the work, including all claims of compensation, damage for libel, slander, invasion of the right of privacy or any other claims based on, arising out of,or connected with the use of said recordings and podcasts. I agree to indemnify UIW and its officers, employees, agents, successors, heirs, and assigns, for any and all claims, liabilities, damages, and expenses, including reasonable attorneys' fees actually incurred, due to any claimed infringement of copyrights, trade names, trademarks, service marks, right of publicity orprivacy, or other proprietary, personal or property right arising from publication of the work through the hosted media or as aresult of my breach of any covenant or warranty herein contained.

This Agreement shall be governed by and interpreted in accordance with the laws of the State of Texas.

By my signature, I represent that I have read and fully understand the terms of this release. (A parent or guardian of youthunder 18 must also sign.)

Name (print):	Date of Birth:	
E-mail Address:		
Home Phone:		
Signature:	Date:	
I HAVE CAREFULLY READ THE ON BEHALF OF THE MINOR CH	S CONSENT AND RELEASE FORM AND AGREE TO ITS ILD IDENTIFIED ABOVE.	TERMS ON MY BEHALF AND
Signature of Parent/Guardian (of youtl	h under 18):	_
Name of project: Veterans Scholarsh	uip	



Dear UIW Veterans Scholarship Donor,

Sincerely,