

THE NICK BACON MEMORIAL SCHOLARSHIP FUND

Presented By: Veterans of Foreign Wars, Department of Arkansas

SCHOLARSHIP PURPOSE & ELIGIBILITY:

The Nick Bacon Memorial Scholarship Fund awards annual college scholarships to deserving children and grandchildren of Veterans who have been rated 30% or higher service-connected disabled by the Department of Veterans Affairs, and are current members of an Arkansas VFW Post (or were members in good standing at the time of death).

• SCHOLARSHIP YEAR: 2026–2027

• APPLICATION DEADLINE: 13 MARCH 2027

(Applications received after the deadline will be held for the next scholarship cycle.)

SECTION 1: APPLICANT PERSONAL INFORMATION

REQUIRED ATTACHMENT: Attach a color copy of official photo ID (e.g., Driver's License or State ID).

Full Name: _____ Age: _____ DOB: _____
Place of Birth: _____ SSN (Last 4): XXX - XX - _____
Home Address: _____
City / State / Zip: _____, _____
Home Phone: _____ Cell Phone: _____
Email Address: _____
Driver's License # & State: _____

SECTION 2: QUALIFYING DISABLED VETERAN INFORMATION

REQUIRED ATTACHMENT: Attach a copy of the Veteran's most recent annual VA Summary of Benefits Letter showing combined service-connected evaluation percentage.

Veteran's Full Name: _____
Relationship to Applicant: ☐ Child ☐ Grandchild Veteran Status: ☐ Living ☐ Deceased
Arkansas VFW Post #: _____ Post Location/City: _____

SECTION 3: APPLICANT EDUCATION & COLLEGE PLANS

REQUIRED ATTACHMENTS:

1. Official High School Transcript
2. Cover Letter explaining why you would be honored to receive this scholarship, including a minimum 150-word essay about Nick Bacon, who he was, and why he received the Medal of Honor
3. Letter of Recommendation from an educator

High School Name: _____
Address / City / State / Zip: _____
Principal's Name: _____ Graduation Date: _____
Current GPA: _____ Honors / Sports / Activities: _____
Most Enjoyable HS Experience: _____
College Choice: _____ Advisor/Registrar: _____
College Address: _____
Intended Start Term: _____ Status: ☐ Freshman ☐ Other

Intended Major / Degree Goals: _____

SECTION 4: APPLICANT STATEMENT & SIGNATURES

I hereby declare that all information provided herein is complete and truthful to the best of my knowledge. I am applying for a college scholarship awarded by The Nick Bacon Memorial Scholarship Foundation. If honored with this award, I promise to maintain my best possible grades and highest personal behavior standards.

Applicant Signature: _____ **Date:** _____

Parent / Legal Guardian Consent (If applicant is a minor):

Parent Printed Name: _____ **Phone:** _____

Address / City / State / Zip: _____

Parent Email : _____ **Parent Signature:** _____

SUBMISSION INSTRUCTIONS

Please mail the completed, signed application along with all required attachments to:

*The Nick Bacon Memorial Scholarship Fund
Arkansas VFW Headquarters
3805 McCain Park Dr. Suite 106
North Little Rock, AR 72116*