

**Georgia Chapter
National Association of Postmasters
2008 Scholarship Application**

Please print or type:

APPLICANT INFORMATION

Applicant Name _____
Last First MI

Home Address _____

City _____ ZIP + 4 _____

Social Security Number _____ Telephone # _____

SPONSORING NAPUS MEMBER

Position of sponsor (circle one) Office: _____

Postmaster Retired OIC or Associate Member

Name of Sponsor _____
Last First MI

Address _____

City _____ ZIP + 4 _____

Signed _____ Date _____

The above signature certifies that you are presently a NAPUS Member and the applicant is your child or grandchild.

SCHOOL INFORMATION

High School Attended _____

Address _____

City _____ ZIP + 4 _____

Graduation Date _____

Transcript from an accredited school showing GPA must be attached when submitted.