



Student Acknowledgement Form

Ohio War Orphan & Severely Disabled Veteran's Children Scholarship

By signing this form I, _____, acknowledge that if I am awarded, but have not utilized the Ohio War Orphan & Severely Disabled Veterans' Children Scholarship in a year or more, my scholarship may be placed in an inactive status. I will need to contact the Program Manager for more details on reactivating my scholarship by the award year deadline date of May 15.

Student Signature _____

Date _____

*****Your initial application will be incomplete without this form attached.*****

Cleone Brandy
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