

THE SAPPER ASSOCIATION
ESSAYONS MEMORIAL SCHOLARSHIP APPLICATION
233 ILLINOIS AVENUE, SUITE 1, #793
FORT LEONARD WOOD, MO 65473

SAP-ASSO

December 21, 2025

MEMORANDUM FOR Essayons Memorial Scholarship Applicants

SUBJECT: LTG (R) Robert B. Flowers (Regimental) and the Falaniko (Sapper) Scholarship

Scholarship Opportunities

The Sapper Association has been generously endowed by Association Members, Partners and Donors who have, through donations and gifts established two scholarship funds. The LTG (R) Robert B. Flowers, **(Regimental)** and the Falaniko, **(Sapper)** Scholarships in order to bestow financial resources to a full or part time undergraduate students each year. Total value of each Scholarship is \$5,000 divided into two \$2,500 per scholarship in order to benefit four students seeking higher education. Applicants must be a qualified child, widow or spouse of a **tabbed Sapper Graduate** from the Sapper Leader Course at Fort Leonard Wood, Mo; in addition, applicant's sponsor must also be a Member of the Sapper Association a minimum of six months prior to dependent or spouse applying (**Black or Red Card**), **Hall of Fame and or Gold Star Family**). The Essayon's Scholarships are specifically for dependents and widows, currently not open to Active-Duty Sapper Instructors. Recipients of each scholarship will be videotaped at the Sapper Rendezvous or required to submit a video for historical purposes.

Application Procedure

1. Applications are available annually in July. Applications can be downloaded on The Sapper Association website or requested at sapperassoc@gmail.com. **Applications are due NLT March 20th of each year.** No exceptions. Screening and Selection process will occur for both Scholarships annually in March. Recipients will be notified by the end of March NLT the 1st week in April.
2. Completed application, current school transcript(s), two letters of recommendation, two letters from a volunteer Coordinator of credible charities, a one-page essay in your own words on the importance of **"Making A Difference"** in your community. Documents and Essay must be emailed to sapperassoc@gmail.com for the Scholarship Committee by **March 20th annually**. Please allow three business days and follow up to ensure application has been received by the Sapper Association Scholarship Committee Chairman. **Recommend the application is typed.** Additional paper may be used if more room is needed for responses (**do not exceed two pages**). It's very important that responses are clear, concise and candid in order to assist the Scholarship Committee to get to know you. Email questions to the President of the Sapper Association, Ernest M. Urquieta at sapperassoc@gmail.com.
3. After reviewing all applications, the Scholarship Committee will contact the selected applicants by email. The scholarship recipients will be invited to the presentation of awards during the **Sapper Rendezvous held annually in April**. Recipients of each Scholarship Award are highly encouraged to attend the scholarship presentation with their sponsor. If unable to attend, the recipients sponsor must contact the chairperson of the Scholarship Committee 72 hours prior to awards presentation, so the Scholarship Committee Chairman can inform the Executive Directive / President for determination.
4. This application is for one academic school year, however a spouse, widow or child may

re-apply in following years if qualifications are met. Spouses, Gold Star Family members, Widows or children of Sapper Tabbed members and Sapper Association Members in good standing are entitled to receive a total of four scholarships, however if you have received scholarship in a previous year, the applicant will still have to compete with new applicants for the scholarship. **Applicants sponsor must be a Sapper Association Member.**

5. Please initial the Essayons Memorial Scholarship Applying for:

LTG (R) Robert B. Flowers Regimental Scholarship _____

The Falaniko Sapper Memorial Scholarship _____

Personal/Contact Information

Name: _____

Home Address: _____

College Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Parent(s)/Guardian(s) Name: _____

Sponsors Name: _____ Sapper Grad Date: _____

If Sponsor (Sapper) was KIA, provide year and location:

Is Sponsor or Family Member a member of Sapper Association _____ Year Joined _____?

Check One:

Black Card _____ Red Card _____ Hall of Fame _____ Gold Star Family _____ BSC Winner _____

School Activities

List group or individual school activities in which you're an active member and identify any leadership role or responsibilities you may have (Sports, FFA, DECA, STEM etc...).

Community Service Involvement

Identify Community Service Organizations in which you've been active in and state **"your"** impacts.

Extracurricular Activities

List activities outside of school such as hobbies and interests and identify leadership roles and responsibilities you have performed. Please be specific.

Eligibility

1. * Applicants must be a qualified child, widow or spouse of a Sapper **Graduate** from Fort Leonard Wood, Mo, in the Grade E-5 thru O6, in addition applicants sponsor must be a card carrying (**Black, Red, Best Sapper Competition Winner, HoF, Gold Star**) member of the Sapper Association.

 2. Qualified child is defined as an unmarried child of a Tabbed Sapper living or deceased (Officer/ Enlisted) (included those legally adopted) who are under the age of 24 for the entire academic year.

 3. Qualified Spouse is defined as the person legally married or widowed to the Tabbed Sapper and not remarried at the time of application for the scholarship.

 4. *Tabbed Sapper means those tabbed (graduated from Sapper School and awarded the Sapper Tab, from the U.S. Army Sapper Leader Course at Fort Leonard Wood, Missouri) or tabbed Sappers killed in combat or training. This includes Active Duty Army, Marines, National Guard, Reservist's and Veterans.*

Select One	Scholarship Name	Sponsors Name	Qualified Spouse	Qualified Child	Required GPA	Other
	LTG (R) Robert B. Flowers				3.0 / 4.0	Sapper Grad/
	Falaniko				3.0 / 4.0	GSFM

Academic

Name of current Academic Institution:

Date of Graduation: _____

High School Class Rank _____ out of _____ High School Grade Point Average _____ *

Name of College attending: _____ City, State _____

Name of Trade School, Seminary or Certification Course attending _____

City, State _____

High School or College Status as of Current School Year Circle one:

Freshman

Sophomore

Junior

Senior

Cumulative College Grade Point Average _____ * Major _____ Minor _____

Do you plan to attend college as a full-time student for the full school year?

☐ Yes

☐ No

If yes, which school? _____ City, State _____

Have you received an Essayons Memorial Scholarship in the past?

☐ Yes

☐ No

If yes, which one? _____ Date awarded _____

List recognition, awards or honors you've received in school, church, work, or community in the past year.

*Please include a copy of your academic transcripts with this application from High School or College as appropriate. By submitting this application, I authorize the Scholarship Committee to verify my GPA, credits and class load with my current Academic Institution.

Your Personal Journey

Please respond thoughtfully and specifically to each question, developing and expressing your ideas **on a separate sheet of paper (2-3 paragraphs per answer)**.

Typed responses are preferred.

1. Give a brief summary and outline of your personal, professional and educational goals.
2. How has your Sponsor (Sapper) influenced and impacted your life?
3. Why is it important to overcome failure?
4. Explain why this scholarship is important to you.
5. **Two Letters of Recommendations are required (Cannot come from Family Members)**

Please give name, email, home address and phone number of two-character references who can attest to your character, personal and educational goals.

Name 1: _____

Address: _____

Phone: _____ email: _____

How do you know this person? _____

Name 2: _____

Address: _____

Phone: _____ email: _____

How do you know this person? _____

Would you be available for a personal interview or can you provide a short video (3-4m) on the importance of this Scholarship? ☐ Yes ☐ No

Thank you for applying for the Essayons Memorial Scholarship Award!

Scholarship Application Checklist:

- ☐ Completed Application
- ☐ School Transcript
- ☐ Recommendation Letters
- ☐ Community Service Verification Letter

Your Signature: _____

Date _____

Sponsors Signature _____

Date _____

Ernest M. Urquieta

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The Sapper Association

President

sapperassoc@gmail.com

SLTW!