

THE AMERICAN LEGION
Department of Washington

CHILDREN & YOUTH SCHOLARSHIP FUND

TWO SCHOLARSHIPS - One (1) \$2500 and One (1) \$1500

QUALIFICATIONS

1. Must be the son or daughter of a member of The American Legion, Department of Washington, or its Auxiliary, living or deceased, currently in good standing, or in good standing at time of death.
2. Must currently be enrolled in an accredited school as a high school senior.
3. May attend any accredited or recognized institution of higher education, or trade or vocational school in the State of Washington.
4. Grades to be considered will cover the last three semesters prior to April 1.
5. Application for Scholarship must be approved by the local American Legion Post, signed by the Post Commander, the Post and include Post name and number, date of application.
6. The Department Children & Youth Commission will be the sole judge of applications and will be responsible for awarding the scholarships.
7. Applications will be evaluated on the basis of Presentation, Family financial needs, Goals, Commitment to goals, and initiative.
8. The Department Children & Youth Commission will certify the names of the winners to the Department Adjutant who will present checks to the winner of the \$2500 and the \$1500 scholarships. A check in the amount of \$1250 (\$2500) and one for \$750(\$1500) will be given to the winners at the start of the semester following the next Department Convention. One more payment of \$1250(\$2500) and \$750(\$1500) will be given at the start of the next semester, **PROVIDING** - that the recipients have maintained a grade point average of 2.0 or better, and have signified their intentions of continuing their schooling
 - A. Where school attended is on a quarterly basis, \$900 (\$2500) and \$500 (\$1500) will be given at the start of the Fall quarter. At the beginning of the Winter and Spring quarters, \$800 (\$2500) and \$500 (\$1500) will be given.
 - B. In the event either recipient of either scholarship fails to maintain a 2.0 grade point average or drops out of school any unpaid portion of the scholarship will revert to the Scholarship Fund and may, at the discretion of the commission, be awarded to a qualified alternate.
9. Scholarship Application Forms are available at local American Legion Posts and additional forms may be obtained by the Posts from the Department Adjutant, The American Legion, Department of Washington, PO Box 3917, Lacey, WA 98509-3917.
10. **DEADLINE:** All applications are to be physically in Department Headquarters by April 1st. Mail applications to: THE AMERICAN LEGION, Department of Washington, P.O. Box 3917, Lacey, WA 98509-3917.

THE AMERICAN LEGION
Department of Washington
P O Box 3917
Lacey, WA 98509-3917

APPLICATION FOR CHILDREN & YOUTH SCHOLARSHIP

Part I

FAMILY DATA

1. Name _____ 2. Age _____
3. Home address _____
4. Mailing address _____
5. Date of Birth _____ 6. Location _____
7. Home phone number _____
8. Father's (or guardian) name _____
9. Father's (or guardian) address _____
10. Father's (or guardian) occupation, business firm, and address _____

11. Mother's name _____
12. Mother's address (if different than father's) _____
13. Mother's occupation, business firm, and address (if employed) _____

14. Name, number and address of Post of The American Legion (or American Legion Auxiliary Unit) to which your father or mother belongs. _____
15. Current Card number _____ Year _____

Part II

SCHOOLING

1. Name and address of High School _____
2. Name of School Principal _____
3. Grades received for last three Semesters prior to April 1st of year application are made. (Attach school document showing grades for First, Second, and Third Semester.)
4. Name and address of the College, University, Trade or Vocational School applicant wishes to attend.

5. Has applicant been accepted by the school of his (her) choice? _____
6. Type of course applicant wished to pursue. _____

Part III

FINANCIAL

1. Briefly explain your financial plans for your college education. _____

2. What percentage of your estimated annual college expenses will be provided by?
Parents or family? _____ Self? _____ Scholarships? _____
Savings or insurance? _____ Other? _____

3. Please indicate what you have saved from employment which will be available for future college expenses:

<u>Year earned</u>	<u>Amount saved</u>
_____	_____
_____	_____
_____	_____
_____	_____

4. Do you have a possibility of a job for the summer following graduation? _____

Estimate savings during summer following high school graduation. \$ _____

Part IV

PERSONAL HISTORY

1. List subjects in which you are interested. _____

2. List school activities in which you have participated, including committees. _____

3. List interest and activities outside of school (i.e.: 4-, Scouts, Boys State, Girl State, etc). _____

4. Attach a personal letter fully explaining why you are applying for this scholarship and your future goals.
5. Names, Address, and occupations of three references:

6. Attach a letter of recommendation from school Principal or Counselor.

Part V

STATEMENT TO BE COMPLETED BY PARENT OR GUARDIAN

1. Do you confirm and agree with applicant's statements and intentions as stated in this application and his (her) letter? _____

2. Please give the ages and number of children in the family who are completely dependent for their living.
Number _____ Relationship _____

3. Are there others partially or completely dependent upon your family for support?
Number _____ Relationship _____

4. How many of your children, other than applicant, are attending college or are planning to attend who will be enrolled within next three years? _____

5. Approximate family income (husband and wife) for last calendar year? _____

6. Is the family willing and able to provide applicant with any additional financial assistance if necessary in completing the year in college?

If not, explain: _____

7. Please make any other statement you wish that might be helpful in considering this application. _____

8. Agreement release information: "I give my permission for the information contained in this application to be reviewed by scholarship committee."

Date _____

(Parent's/Guardian's signature)

Date _____

(Applicant's signature)

Part VI

CERTIFICATION OF POST COMMANDER

As Commander of _____ Post _____, The American Legion, Department of
Washington, located at _____, I
certify that I have interviewed the applicant and reviewed this application.

Dated this _____ day of _____, 20____, at _____, Washington.

Commander's Signature

Print Commander's Name