

American Legion Scholarship

Name _____

Date _____

Mailing Address _____

Phone _____

City _____

State ____ Zip _____

Email _____

Parent/Guardian Information

Name _____

Name _____

Phone _____

Phone _____

Academics

Cumulative Grade Point Average ____ Rank _ of _ ACT Composite ____

Attach a copy of your most current transcript.

Briefly state your career plans.

Briefly list your extracurricular activities.

List as well civic projects and any volunteer activities you have been involved in.

Attach a copy of any awards or honors you have received.

Briefly state your financial status, your need. Please state your EFC as determined by the FAFSA. ____ If you have not filed please explain.

Please list any extenuating circumstances, information which the FAFSA does not take into account.

Name _____ Date _____

Deadline: April 1, 2022

Please send the completed application to golfnfule@yahoo.com and rcluteamlegionpost125@gmail.com

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