



AMERICAN LEGION AUXILIARY

RULES

1. Candidates for this award shall be daughters, sons, grandsons, granddaughters, great-granddaughters, great-grandsons, of veterans who served in the Armed Forces during eligibility dates for membership in The American Legion.
 - a. April 6, 1917 through November 11, 1918 (WWI)
 - b. December 7, 1941 through December 31, 1946 (WWII)
 - c. June 25, 1950 through January 31, 1955 (Korea)
 - d. February 28, 1961 through May 7, 1975 (Vietnam)
 - e. August 24, 1982 through July 31, 1984 (Grenada and Lebanon)
 - f. December 20, 1989 through January 31, 1990 (Panama)
 - g. August 2, 1990 to the date of cessation of hostilities (Persian Gulf to present)
2. Applicants must be in their senior year of high school.
3. Application must be returned by May 12, 2017. Return to your School Guidance Counselor or Mail to American Legion Auxiliary Post 14, 103 West Third Street, P.O. Box 436, Bainbridge Ohio 45612.
4. Judging, at all levels, shall be on the following basis:

Character/Leadership	- 25%
Essay/Application	- 25%
Financial Need	- 25%
Scholarship	- 25%

THE DECISION OF THE JUDGES SHALL BE FINAL.

1. The award will be paid directly to the school for the first semester upon notification from the school that the student has registered.

APPLICATION PACKET REQUIREMENTS

1. Completed application packet.
2. The following letter of recommendation:

One letter from either the principal or guidance counselor of the school from which the applicant will graduate, to include size of class and student's position in the class and the cumulative grade point average.

3. A certified transcript or photocopy of the applicant's high school grades.
4. A copy of ACT or SAT test scores.
5. A copy of the FASFA (financial aid) form submitted for assistance in college.
6. **A brief statement of the military service of parent or grandparents, including the branch of service and dates of service, or a photocopy of parent's or grandparents' discharge papers.**

EACH UNIT AND DEPARTMENT WILL BE RESPONSIBLE FOR VERIFYING ALL NECESSARY INFORMATION IN THE APPLICANT'S PACKET.

**AMERICAN LEGION AUXILIARY
APPLICATION**

Name of Applicant _____

Address _____

City _____ State _____ ZIP _____

Date of Birth _____ Phone _____

Name of father or guardian _____

Address: _____

Veteran: Yes _____ No _____ Dates of Military Service _____

Occupation of father or guardian: _____

Annual gross income _____

Name of mother or guardian: _____

Address: _____

Veteran: Yes _____ No _____ Dates of Military Service _____

Occupation of mother or guardian _____

Annual gross income _____

Number of dependent children under 18 years _____ Over 18 years _____ Grade levels _____

Total monthly compensation, pension or trust received by parent and/or children \$ _____

Are you eligible for or drawing Social Security payments? Yes _____ No _____

If so, monthly amount \$ _____ Time limit of benefits _____

Are you eligible for benefits under Survivors and Dependents Education? Yes _____ No _____

Proposed date of graduation from high school _____

Name of college or university you hope to attend _____

Print or Type Full Name

Signature of Applicant

NOTE: Please be sure to attach other required materials to this application, and return **NO LATER THAN May 12**

a. Why would receiving this scholarship be important to you? Please explain. _____

b. What course of study do you plan to pursue and why? _____

c. Describe your involvement in school, church and community activities. Use attachment if necessary. _____

d. Why do you think the United States' patriotic organizations such as the American Legion Auxiliary are important to the world today? Please explain your answer in a one page Essay.