

AMERICAN LEGION AUXILIARY, DEPARTMENT OF NEW YORK

SCHOLARSHIP COVER SHEET

NOTE: THIS SHEET MUST ACCOMPANY EACH APPLICATION

NAME _____

ADDRESS _____

PHONE _____ DATE OF BIRTH _____

IT IS IMPERATIVE TO READ AND FOLLOW ALL RULES FOR EACH SCHOLARSHIP CATEGORY.

Please check scholarship for which you are applying:

- _____ Department Scholarship
- _____ Department District Scholarship
- _____ Past Presidents Parlay Student Scholarship / Medical Field
- _____ Raymond T. Wellington, Jr. Memorial Scholarship
- _____ 1st Lt. Michael L. Lewis, Jr. Memorial Fund Scholarship
- _____ The Helen Klimek Student Scholarship
- _____ Mary Ann K. Murtha Memorial Scholarship

NOTE: If applying for more than one scholarship, **ONLY ONE ORIGINAL TRANSCRIPT AND FOUR ORIGINAL RECOMMENDATIONS ARE NEEDED.** Copies will be accepted for other applications. You **MUST** include the following with applications (except for the 1st Lt. Michael L. Lewis, Jr. Memorial Fund Scholarship):

- Four letters of recommendation, which **MUST INCLUDE** one from Principal or, Guidance Counselor, one from clergyman of choice, and two from representative citizens
- One certified copy of high school grades
- Statement of extracurricular activities
- Statement of Participation in civic affairs
- Certificate of acceptance and/or letter from college, etc.
- Essay requirement (see individual scholarship requirement for topic)
- Must be sponsored by a local American Legion Auxiliary Unit. Signature of Unit Pres. and Education Chairman required.
- No American Legion Auxiliary Unit may enter more than one candidate for each scholarship competition

Unit _____ **County** _____ **District** _____