## AMERICAN LEGION AUILIARY DEPARTMENT OF NEW YORK, INC.

1580 Columbia Turnpike, Bldg. #1, Suite #3, Castleton-on-Hudson, NY 12033 (518)463-1162 / 800-421-6348 / Fax (518) 449-5406

#### DEPARTMENT DISTRICT SCHOLARSHIP

A scholarship of \$1,000 shall be awarded to an eligible candidate planning to further his/her higher education. Upon notification of scholarship award, please notify The American Legion Auxiliary office to discuss payment options.

#### **RULES**

- 1. Candidates for this award shall be daughters, granddaughters, great-granddaughters, sons, grandsons, or great-grandsons of veterans who served in the Armed Forces during WWI, WWII, the Korean Conflict, Vietnam War, Grenada/Lebanon, Panama, the Persian Gulf and War on Terrorism.
- 2. Applicant must be United States citizen and a resident of New York State.
- 3. Applicant must be a senior or a graduate of an accredited high school.
- 4. Each Auxiliary Unit may submit ONE application by March 5th, to the County Education Chairman. Units are responsible for verifying all necessary information submitted by the applicant.
- 5. The County Education Chairman will forward all Unit entries that qualify to the Department Chairman on or before March 15th.
- 6. Selection will be made on the following basis:
  - a. Need-20% Actual need of financial assistance to continue higher education.
  - b. Character-30% High standards of conduct, keen sense of right, adherence to truth and conscience, strength of character, devotion to church and daily duties.
  - c. Americanism-20% Fine ideals, love of Country, ability to accept citizen's responsibilities.
  - d. Leadership-10% Ability to lead and to accomplish through action, personal magnetism, guidance and thought of others.
  - e. Scholarship-20% Scholastic attainment with rating in class, evidence of industry and application in studies.
- 7. The Department Education Chairman will appoint a committee of impartial judges for final judging.

#### **APPLICATION REQUIREMENTS**

- 1. Completed application form.
- 2. A Certified copy or photocopy of applicant's high school grades.
- 3. Four (4) letters of recommendation. One from the principal or guidance counselor of the school in which the applicant is enrolled; one from clergy of choice or other church affiliate; and two from representative citizens, other than relatives, attesting to the character, industry, Americanism, Leadership and Scholarship of applicant.
- 4. A statement of applicant's volunteer work.
- 5. Certification of acceptance and/or letter from the college stating date certification will be received from the school he/she plans to attend.
- 6. Copy of your FAFSA application summary and/or confirmation sheet only.
- 7. Original article written by applicant consisting of no more than 500 words, on a subject of his/her choice.
- 8. Application must be signed by the applicant, the Unit President and Education Chairman of the sponsoring Unit. All applications must be returned to the sponsoring Unit no later than MARCH 1<sup>ST</sup>.

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### **DEPARTMENT DISTRICT SCHOLARSHIP**

Note: This application must be submitted to the sponsoring unit no later than March 1.

Name of Applicant		Telephone		
Street Address	City	State	Zip Code	
Name of Parent		Address (if diffe	Address (if different from above)	
Name of Veteran providing eligibility		Relationship to Applicant		
Branch of service of veteran		Dates of Service		
Name of Applicant's High School		Date of Graduation		
Name of College Applicant plans to attend		Course of Study		
Street Address	City	State Zip (	Code	
\$				
Total Family Income Number of	Dependents under 18	Numbers of De	pendents over 18	
Signature of Applicant		Date		
Signature of Unit President	Signature of Unit Education Chairman			
Unit Name and Number	County	Γ	District	
Signature of County Chairman	Name of County Chairn	nan	County	

THIS APPLICATION MAY BE REPRODUCED FOR ADDITIONAL COPIES