

**AMERICAN LEGION AUXILIARY
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**

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 submitting.

_____ Department Scholarship
_____ Department District Scholarship
_____ Raymond T. Wellington, Jr. Memorial Scholarship
_____ Past President Parley Student Scholarship (Medical Field)
_____ Helen Klimek Student Scholarship
_____ Mary Ann K. Murtha Memorial Scholarship
_____ The Cerullo Memorial Scholarship (Sons of The American Legion)

NOTE: If applying for more than one scholarship, **ONLY ONE ORIGINAL TRANSCRIPT WITH EMBOSSED SEAL AND FOUR ORIGINAL RECOMMENDATION LETTERS ARE NEEDED.** Copies will be accepted for other applications (recommendation letters and a copy of the transcript where the embossed seal is evident). You **MUST** include the following with applications:

- Four letters of recommendation: which include one from the principal or guidance counselor, one from clergyman of choice or other church affiliate, and two from representative citizens.
- One certified copy of high school grades with the embossed seal.
- Statement of extracurricular activities.
- Statement of participation in Civic affairs.
- Certificate of acceptance and/or letter from the college, etc.
- Essay requirement (see individual scholarship requirement for topic).
- Copy of your FAFSA application summary and/or confirmation sheet only.
- **Must be sponsored by a local American Legion Auxiliary Unit. Signature of Unit President and Education Chairman required.**
- No Auxiliary Unit may submit more than one candidate for each scholarship competition.
- **MUST BE RECEIVED BY THE UNIT CHAIRMAN NO LATER THAN MARCH 1ST.**

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