

American Legion Post 31 SCHOLARSHIP APPLICATION

Frankness and honesty are desired in the answers. The scholarship committees will keep all information in strictest confidence.

Deadline: All completed applications must be submitted to Guidance by 5/1/2012

STUDENT INFORMATION

Name: _____
(First) (Middle) (Last)

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

PARENT EMPLOYMENT INFORMATION

Company: _____ Occupation: _____

Company: _____ Occupation: _____

LIST SIBLINGS LIVING AT HOME AND THEIR AGES

LIST MEMBERS OF IMMEDIATE FAMILY ATTENDING POST-SECONDARY SCHOOL, NAME OF SCHOOL, AND YEAR

STUDENT WORK HISTORY

Type of Work	Length of Time	Amount Earned	Amount Saved
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List school and/or community organizations in which you are active or have participated in:

List schools or colleges to which you have applied for admission:

On a separate sheet of paper, briefly give the reason you desire higher education and why you consider yourself a worthy applicant for scholarship aid.

FINANCIAL RESOURCES

If you are a dependent student, you and your parents must complete this form using information from your most recent IRS Tax Return. You are considered a dependent student if you are less than 24 years of age.

	Student	Parent/Spouse
a. Adjusted gross income	\$ _____	\$ _____
b. Total US income tax paid	\$ _____	\$ _____
c. Income earned	\$ _____	\$ _____
d. Untaxed income and benefits	\$ _____	\$ _____
e. Medical/dental expenses not covered by insurance	\$ _____	\$ _____
f. Cash, savings, stocks, bonds, CD's, etc.	\$ _____	\$ _____
g. Net value of real estate holdings not used as primary residence (market value less balance of mortgage)	\$ _____	\$ _____
h. Total number of family members:	_____	

In order to qualify, this application must include:

Two letters of recommendation

Transcript including high school grades, grade point average, standing in class, and class size

Three signatures as follows:

Signature of Student

Signature of Parent or Guardian

Signature of School Counselor