

**AMERICAN LEGION AUXILIARY
DEPARTMENT OF ARKANSAS 2019 ACADEMIC SCHOLARSHIP**

One scholarship in the amount of \$1,000 each will be awarded for 2019 (\$500 in the fall of 2019 and \$500 in the spring of 2020).

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. F. December 20, 1989 through January 31, 1990 (Panama)
- g. August 2, 1960 to the date of cessation of hostilities (Persian Gulf to Present)

1. Applicants must be in their senior year of high school.
2. This is a scholarship to attend an accredited institution of higher education.
3. Applicant must have completed 50 hours of volunteer service within the community during his/her high school years. Hours must be verified in writing by the recipient's organization(s).
4. Applicants must present the completed application to their local American Legion Auxiliary Unit president **ON OR BEFORE MAY 15, 2019.**
5. Judging at all levels shall be on the following basis:

Character/Leadership	25%
Essay/Application	25%
Financial Need	25%
Academic Achievement	25%

THE DECISION OF THE JUDGES SHALL BE FINAL

6. The award will be paid directly to the school for the first semester upon notification from the school that the student has registered. The American Legion Auxiliary, Department of Arkansas must receive certification of enrollment within 12 months of a winner's notification or the scholarship will be forfeited. The scholarship must be used within 24 months of the date winner receives notification by the Department, or the scholarship will be forfeited. Thus, if winning student does not wish to use monies for **FIRST YEAR** expenses, it must then be used for **SECOND YEAR** expenses or be forfeited.

**AMERICAN LEGION AUXILIARY
DEPARTMENT OF ARKANSAS ACADEMIC SCHOLARSHIP 2019**

**In a separate document attached to this application,
Please answer the following questions:**

1. Why would receiving this scholarship be important to you. Please explain.
2. What course of study do you plan to pursue and why?
3. Describe your involvement in school, church, and community activities.
4. Why do you think the United States' patriotic organizations, such as the American Legion Auxiliary, are important to the world today?

NOTE: Please be sure to attach to this application all required materials listed on the following page and submit to the president of the American Legion Auxiliary Unit in the community in which you reside NO LATER THAN MAY 15, 2019.

APPLICATION PACKET REQUIREMENTS

1. Completed application packet for the American Legion Auxiliary, Department of Arkansas 2019 Academic Scholarship.
2. The following four letters of recommendation are required.
 - a. One letter from either the principal or guidance counselor of the school from which the applicant will graduate, to include size of class; student's position in the class, and the cumulative grade point average or your homeschool equivalent;
 - b. One letter from a clergyman/clergywoman of the applicant's choice; and
 - c. Two letters from adult citizens, other than relatives, attesting to the applicant's character in regard to conduct, citizenship and leadership.
3. An original essay consisting of no more than 1,000 words (typed, double-spaced). The title of the essay will be **"How can education, both private and public, help prevent homelessness in our country, particularly that of our veteran population?"**
4. A letter from the recipient's organization(s) verifying 50 hours of voluntary service during high school years.
5. A certified transcript or photocopy of the certified transcript of the applicant's high school grades.
6. A copy of the applicant's ACT or SAT test scores.
7. A copy of the FAFSA (Free Application for Federal Student Aid) form, or a copy of the FAFSA Summary Report and Confirmation Page, or the FAFSA Student Aid Report (SAR).
8. A brief statement of the military service of parents or grandparents, including the branch of service and dates of service, or a photocopy of parent's or grandparent's discharge papers.
9. Please be sure to attach all of these required materials to this application and submit to the president of the American Legion Auxiliary Unit in the community in which you reside NO LATER THAN MAY 15, 2019.

THIS PORTION TO BE COMPLETED BY SUBMITTING UNIT

(PLEASE TYPE OR PRINT)

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

Unit Name and Number _____

Address _____

City, State, Zip _____

1. Judging at all levels shall be on the following basis:

Character/Leadership	25%
Essay/Application	25%
Financial Need	25%
Academic Achievement	25%

2. No Unit may enter more than one candidate in the department competition.
3. The selected entry for each Unit shall be certified by the American Legion Auxiliary Unit president and Unit secretary or Unit education chairman.
4. Selected entry for each Unit should be forwarded to the department for competition at the state level to be received **ON OR BEFORE MAY 22, 2019.**
5. Participation in this scholarship program shall be on a voluntary basis in all Units.
6. Should an entry be received and no Unit affiliation is available, then the application shall be judged in the department headquarters unit.

Unit Name and Number _____

Address _____

City, State, Zip _____

Signature of Unit President

Signature of Unit Secretary
or Education Chairman

**UNIT CERTIFICATION FOR DEPARTMENT OF ARKANSAS
ACADEMIC SCHOLARSHIP**

Unit Charter Name _____

Unit Number _____ Unit City _____

Unit Address _____

Unit President's Name _____

Address _____

City _____ State _____ Zip _____

Signature of Unit Secretary or Unit Education Chairman _____

Phone Number _____

Signature of Unit President _____

Phone Number _____

Signature of Applicant _____ Date _____

Printed Name _____

Telephone Number _____ Email _____

Important Note: Please review the "packet requirements," be sure to attach all required material for this application and submit to the President of the American Legion Auxiliary in or near the community in which you reside no later than May 15, 2019.

**AMERICAN LEGION AUXILIARY DEPARTMENT OF ARKANSAS APPLICATION FOR
\$1,000 ACADEMIC SCHOLARSHIP**

Please submit completed application to the Unit President of the American Legion Auxiliary not later than May 15, 2019. The Department of Arkansas Headquarters must receive the full scholarship packet from the Unit not later than May 22, 2019.

Please type or Print Clearly (Black or Dark Blue Ink)

Name of Applicant: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Applicant Telephone Number: _____ Email: _____

Name of Veteran by which applicant is eligible: _____

Is Veteran Living? ___ Deceased? ___ Applicant's Relationship to Veteran: _____

In household of applicant, number of dependent children age 18 and under: _____ Over age 18: _____
5

Name of Father/Stepfather: _____

Occupation: _____ Annual Income: \$ _____

Name of Mother/Stepmother: _____

Occupation: _____ Annual Income: \$ _____

Total monthly government compensation or pension received by parent and/or children: \$ _____

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

Monthly Income: \$ _____ Time Limit on Benefits: _____

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

Please Note: Applicant's Total Amount Income may not exceed \$75,000

Proposed date of graduation from High School: _____

Name of College or University you hope to attend: _____

List your community, civic or school organizations where you have memberships: _____

Signature of Applicant: _____ Date: _____

Printed Name of Applicant: _____

Important Note: Please review the "Packet Requirements," be sure to attach all required material for this application and submit to the President of the American Legion Auxiliary in or near the community in which you reside not later than May 15, 2019.