## **AMERICAN LEGION POST 32 SCHOLARSHIP**

- Scholarships will be awarded on a nondiscriminatory and objective basis and consistent with the purposes of American Legion Post 32 to descedents or current members of a post or organization of past or present members of the Armed Forces of the United States or auxiliary unit or society of any such post or organization pursuant to Section 501 (3) (19) of the Internal Revenue Code. The term "descendent" shall be interpreted consistent with the laws of the State of Illinois.
- 2. Scholarship award will be in the amount of \$5,000 per year and will not be renewed.
- 3. Scholarship award will be made out to the recipient and the school of choice.
- Request your application from American Legion Post 32. Completed applications must be received by Post 32 no later than May 1 of each year.
- 5. Judging for awarding of scholarship will be based on the following
  - a. CHARACTER 30% high standard of conduct; keen sense of right; strength of character; adherence to truth and conscience.
  - **b. AMERICANISM 30%** fine ideals of love of country; ability to accept within a few years a citizen's responsibilities.
  - c. LEADERSHIP 20% Ability to lead and accomplish through group action, personal magnetism, guidance and thought of others.
  - **d.** SCHOLARSHIP 20% Scholastic attainment; with grades of most recent year of schooling evidence of insustry and application in studies.

# **APPLICANTION REQUIREMENTS**

#### Applicant's material must include:

- 1. Completed application must be submitted in a flat folder on or before May 1. Applications received after the May 1 deadline will not be reviewed.
- 2. Applications that are not fully completed will not be processed: therefore, answer all questions. If a question is not applicable to you, indicate so with N/A. If additional space is required to answer any question, please use a blank sheet of paper as an addendum, making sure that it is identified as part of the application.
- 3. At least three (3) letters of recommendation must be part of the application for the award: one acceptance letter from the type of school you selected: two from responsible citizens to applicant's character, Americanism, scholarship and leadership. Applicant, if so desires, can submit a personal letter talking about their background and why they have choosen this career path.
- 4. If currently attending school a Certified transcript or photocopy of grades.
- 5. An original article written by applicant consisting of not more than 1000 words on the career of his/her choice including feelings on his/her obligation as an American and how scholarship award will help applicant achieve stated goals.
- 6. The applicant is limited to accepting only one scholarship sponsored by the American Legion Post 32.
- 7. A scholarship must be used at a qualified educational institution that normally maintains a regular faculty and curriculum and normally has a regularly enrolled body of pupils or students in attendance at a place where its educational activities are regularly carried on within twelve (12) months of date awarded.
- 8. Applicants for scholarship awards must be descendants of persons that have served honorably in the United States Armed Forces.
- 9. Applicants shall be notified of the results, but no application packets will be returned.

## AMERICAN LEGION POST 32 SCHOLARSHIP APPLICATION

To be submitted to American Legion Post 32, 1120 Sangamon Avenue, Springfield, Illinois 62703, no later than May 1.

Indicate type of school: Nursing	Post Secondary	Vocational
1. Name of Applicant		
Address		
City	State	Zip
2. Age Phone	(include area code)	
3. Name of School of Choice		
Address		
City	State	Zip
4. Name of Parent(s)		
Address (if different)		
City	State	Zip

5. Indicate the full name, branch of service, dates of service, and relationship of the person that qualified your application for consideration for a scholarship award.

Full Name	Relationship
Branch and Dates of Service	
American Legion Post Name or Post Number	

### AMERICAN LEGION POST 32 SCHOLARSHIP APPLICATION

5. continued:

If member is alive, provide current address: (city, state, zip)

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_

If deceased, please provide the dates of that person's membership and date of passing.

Membership Dates \_\_\_\_\_ Date of Passing \_\_\_\_\_

6. If you have attended college, please indicate where, for how long, and attach a copy of your most recent transcript from the colleges attended.

- 7. Estimate length of time to complete your education choice.
- 8. What is your goal after completing your education choice.

Signature of Applicant \_\_\_\_\_