

AMERICAN LEGION POST 574 SCHOLARSHIP FUND

This American Legion is an annual scholarship awarded to a graduating West Branch Senior.

The amount of the scholarship to be awarded is (2) \$500.00 to a West Branch Students.

The scholarship must be applied toward tuition at an accredited College or University.

Consideration to be given to a student who has a financial need for scholarship

Applicant **is preferred (but not required) to have** Parents, Grandparents, or Siblings who have served in any branch of The United States Armed Forces.

Additional considerations based on Scholarship, Leadership, Extracurricular Activities, and Community Service.

You will also be evaluated on the appearance, substance, and accuracy of your application.

In cases where the recipient does not attend school, or has other plans, the American Legion Post 574 Scholarship Officers must be notified and an alternate will be selected.

George D. Worth American Legion Auxiliary Scholarship
Application Form
Submit to High School Guidance Office before 3:00 pm on April 28, 2023

Personal & Family Data

Name _____ Date of Birth _____

Address _____
Street City State Zip

Parents or Guardian:

Father _____ Occupation _____ Military Service Y or N

Mother _____ Occupation _____ Military Service Y or N

My _____ has served in the military.
Relative (ie. Grandpa)

Other Children in the Family:

	<u>Name</u>	<u>Age</u>	<u>College?</u>	<u>Plan to Attend</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

(Please use an additional sheet is necessary)

Extracurricular Activities including Community and Church Organizations
(Please indicate any offices held)

Employment

Awards

College Plans

Major Field of Study _____

Name of College(s) where applied _____

Have you been granted scholarships or financial aid (Y or N) _____

If yes, please give details _____

Please briefly explain why you have chosen this career path _____

Please briefly explain how you plan to “give back” to your community upon your
graduation: _____

Please attach an official transcript of your grades.

I hereby authorize West Branch High School to release all pertinent records to the Memorial Scholarship Committee. I understand the decision of the Scholarship Committee is final.

Signature of Student

Date

Signature of Parent/Guardian

Date