

**THE AMERICAN LEGION - DEPARTMENT OF VERMONT
EDUCATION AND SCHOLARSHIP COMMITTEE
SCHOLARSHIP APPLICATION**

1. NAME : Last _____ First _____ M.I. _____

Street: _____

City/State/Zip: _____

2. Social Security #: _____ 3. Tel. No.: _____

4. Date Of Birth: _____ 5. Year of Graduation: _____

6. NAME AND ADDRESS OF HIGH SCHOOL NOW ATTENDING:

7. FAMILY & FINANCIAL INFORMATION:

Fathers Name: _____	Mothers Name: _____
---------------------	---------------------

Occupation: _____	Occupation: _____
-------------------	-------------------

Gross Income: _____	Gross Income: _____
---------------------	---------------------

# Brothers/Sisters: _____	# College Students: _____
---------------------------	---------------------------

8. PLEASE LIST HIGH SCHOOL OFFICES YOU HAVE HELD:

9. PLEASE LIST SCHOOL ACTIVITIES AND SPORTS IN WHICH YOU HAVE PARTICIPATED:

10. NAME & ADDRESS OF COLLEGE/UNIVERSITY YOU WILL BE ATTENDING IN THE FALL

MAJOR: _____

11. PLEASE WRITE A PARAGRAPH ON WHY YOU WANT TO ATTEND THIS COLLEGE/UNIVERSITY. (Use Separate Sheet)

Complete ALL sections of this application - attach transcript and letters of recommendation. Incomplete information will result in applicant not being considered for one of our scholarships. (Use additional sheets as necessary.)

Student Signature: _____ Date: _____