



The American Legion, Department of Virginia  
The Lucian Butler Scholarship Application

**LUCIAN BUTLER AMERICAN  
LEGION SCHOLARSHIP  
APPLICATION DIRECTIONS  
January 2018**

**ELIGIBILITY:** High school boys and girls who are sons, daughters, grandsons, granddaughters of members of the Virginia American Legion family who exemplify the spirit and true American values and have been admitted to an accredited four year college or university.

Current scholarships are limited to those entering the freshman class. Awards in follow on years will be considered as funds are available providing student has 3.5 GPA or higher. Awards are intended for fall semester.

Completing a scholarship application can be a difficult task. Below are some tips to help complete an application:

1. Applications must be typed or completed online at [www.valegion.org](http://www.valegion.org). Application will be found under Programs/Scholarships. If submitting form on-line, do not use internet explorer as there are difficulties entering data in some fields.
2. Do not attach any documents or additional pages to the application, except as required.
3. If the qualifying legion family member is deceased, provide the year of death. If known provide state and post location/number.
4. Review the entire application before completing it. If a field is left blank, it will count against you. If you cannot answer a question, put a reason in the field.
5. Proofread your answers/essays in this application in addition to having at least one other person proofread your application. Spelling errors or poor writing skills will have a negative effect on your chances of receiving the scholarship. Incomplete/unprofessional applications will be rejected.
6. Use a computer to prepare your final document. Applications will not be considered if they are handwritten.
7. Each application is judged on its own merit so include any information that makes you exceptional and a good candidate to receive the award
8. Keep a copy of everything you submit!
9. Pay close attention to the scholarship deadline. If mailed, it must be postmarked no later than 1 March. If submitted on-line, deadline is no later than midnight 1 March.
10. Submittals in follow-on years simply require a letter asking for consideration with a copy of current transcript and providing student has a GPA of 3.5 or higher.

**LUCIAN BUTLER AMERICAN LEGION  
SCHOLARSHIP APPLICATION**

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Name \_\_\_\_\_

Address \_\_\_\_\_

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

E-mail \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Date of Birth Mon/Day/Year \_\_\_\_\_

I am the (state relationship \_\_\_\_\_) of (Legion Family Name) \_\_\_\_\_

Address (if living) \_\_\_\_\_ Member Number \_\_\_\_\_

Expected Family Contribution \$ \_\_\_\_\_ (To find EFC go on-line at [www.finaid.org](http://www.finaid.org) "click" on Calculators and use "Federal Methodology").

**High School Record – This section is to be completed by a high school official. (May be hand written. If is application being made on line, page should be scanned and emailed to [eeccleston@valegion.org](mailto:eeccleston@valegion.org) or faxed to 804-358-1940.**

Number of students in High School \_\_\_\_\_ Number of students in applicant's class \_\_\_\_\_

Cumulative Grade Point Average (GPA) \_\_\_\_\_ GPA scale is \_\_\_\_\_ (i.e., 4, 6, 12 point, etc.)

Class Rank \_\_\_\_\_ Expected date of Graduation \_\_\_\_\_

SAT Scores Math \_\_\_\_\_ Verbal \_\_\_\_\_ Written \_\_\_\_\_ Total \_\_\_\_\_ and/or ACT Score \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_

Signature

Type/Print name and title  
Affix school stamp or seal

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**For Official Use Only**

GPA \_\_\_\_\_ Class Rank \_\_\_\_\_ SAT/ACT Score \_\_\_\_\_ Activities \_\_\_\_\_ Honors&Awards \_\_\_\_\_

Community Service/Volunteerism \_\_\_\_\_ Total \_\_\_\_\_



Father's name and occupation \_\_\_\_\_  
\_\_\_\_\_

Mother's name and occupation \_\_\_\_\_  
\_\_\_\_\_

List brothers and/or sisters and their ages

NAME	AGE
_____	_____
_____	_____
_____	_____
_____	_____

Please indicate your job or work experiences. List dates from - to: List number of hours per week/month and total hours. List any responsibilities/accomplishments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your most significant challenge or accomplishment and explain its value to your life.

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**CERTIFICATION**

If I am selected as a scholarship winner and in consideration thereof, I understand, agree and hereby grant permission to the American Legion to use my likeness and name in announcing and promoting this scholarship program. I understand and agree that the American Legion State Selection Committee is solely responsible for the selection of the scholarship winner(s) and its decision is final. I have completed the scholarship application and have attached documentation that verifies my father/mother/stepfather/stepmother/grandfather or grandmother is, or has been, a member of the Virginia American Legion Family (Legion, Auxiliary, Sons of American Legion). I grant permission to the school of higher education I attend to release information concerning my enrollment status, academic standing and financial need to the American Legion for use in administering my scholarship award. In submitting this application, I certify that the information is complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Student Signature

Date \_\_\_\_\_

If my child is selected as a scholarship winner and in consideration thereof, I understand, agree and hereby grant permission to the American Legion to use my child’s likeness and name in announcing and promoting this scholarship program. I understand and agree that the American Legion State Selection Committee is solely responsible for the selection of the scholarship winner(s) and its decision is final. My child has completed the scholarship application and has attached documentation that verifies his/her father/mother, step father/step mother/grandfather or grandmother is, or has been, a member of the American Legion Family (Legion, Auxiliary, Sons of American Legion). I grant permission to the school of higher education I attend to release information concerning my enrollment status, academic standing and financial need to the American Legion for use in administering my scholarship award. In submitting this application, I certify that the information is complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Parent Signature

Date \_\_\_\_\_

