

**LUCIAN BUTLER AMERICAN LEGION
SCHOLARSHIP APPLICATION
DIRECTIONS
January 2017**

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.

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. 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. 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.
4. 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.
5. Use a computer to prepare your final document. Applications will not be considered if they are handwritten.
6. Each application is judged on its own merit so include any information that makes you exceptional and a good candidate to receive the award
7. Keep a copy of everything you submit!
8. 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.
9. S u b m i t t a l s i n 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.



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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 "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 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

For Official Use Only

GPA _____ Class Rank _____ SAT/ACT Score _____ Activities _____ Honors&Awards _____

Community Service/Volunteerism _____ Total _____



The American Legion, Department of Virginia

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.



The American Legion, Department of Virginia

Explain your long-range goals for school and career. Describe what specific skills and personal values you want to foster in yourself to achieve these ends.



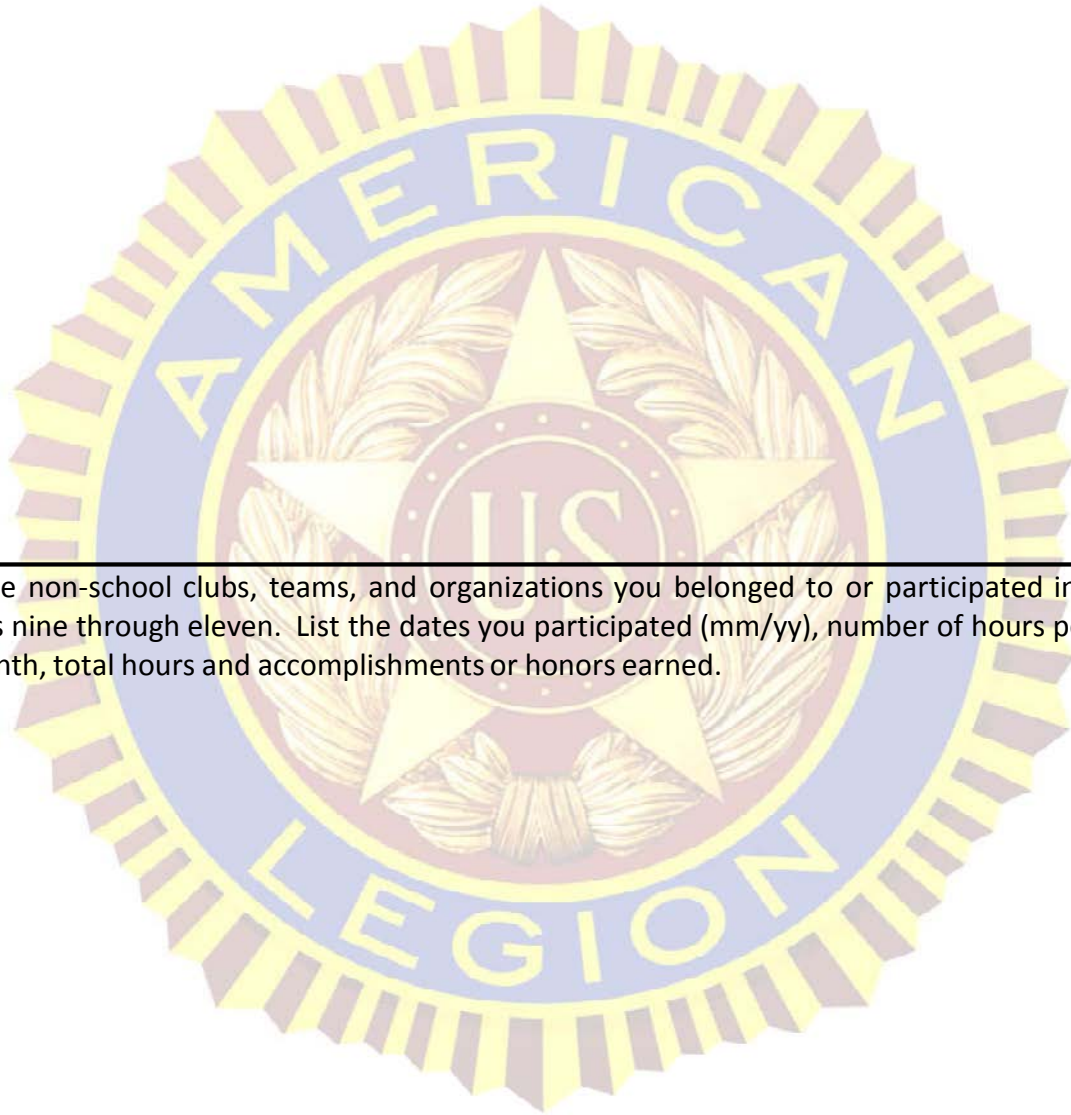
The American Legion, Department of Virginia

Describe any circumstances that may affect your family's ability to provide for your college education.

Describe any community service/volunteer work in which you have been involved during your high school career (grades nine through eleven). If your community service/volunteer was required, explain why.



Activities – List the school clubs, teams, and organizations you belonged to or participated in during grades nine through eleven. List the dates you participate (mm/yy), number of hours per week or month, total hours and accomplishments or honors earned.



List the non-school clubs, teams, and organizations you belonged to or participated in during grades nine through eleven. List the dates you participated (mm/yy), number of hours per week or month, total hours and accomplishments or honors earned.



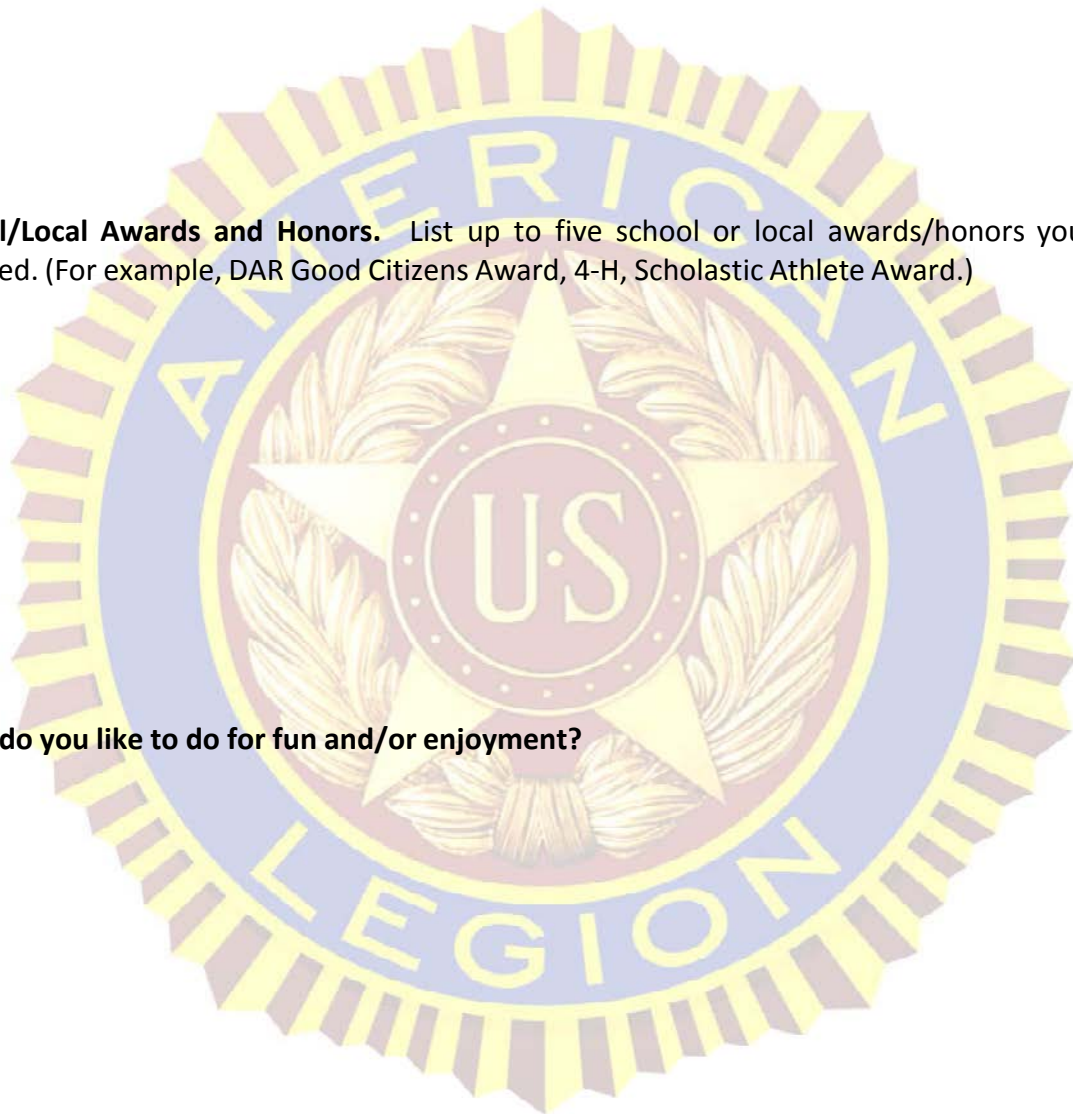
State/National Awards and Honors. List up to five state or national awards/honors you have received. (For example, All State Choir, National Merit Semifinalist.)

- 1.
- 2.
- 3.
- 4.
- 5.

School/Local Awards and Honors. List up to five school or local awards/honors you have received. (For example, DAR Good Citizens Award, 4-H, Scholastic Athlete Award.)

- 1.
- 2.
- 3.
- 4.
- 5.

What do you like to do for fun and/or enjoyment?



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.

_____ Date _____
Student Signature

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.

_____ Date _____
Parent Signature

