



Utica Post 229
Scholarship Application
for College-Bound
High School Seniors

Utica Post 229 awards \$1,000 and \$500 scholarships.

The Post uses the Oneida County Legion Scholarship Application for determining its awards.

ONEIDA COUNTY AMERICAN LEGION SCHOLARSHIP AWARD

A scholarship award will be offered to a deserving graduating high school senior who exemplifies good citizenship. The student must plan to pursue an eligible vocational technical course above high school or preparatory school level, or attend a two or four year college resulting in an associate or baccalaureate degree.

Criteria For Eligibility:

1. The applicant must be a descendent of a member of the ONEIDA COUNTY AMERICAN LEGION, ONEIDA COUNTY AMERICAN LEGION AUXILIARY, or ONEIDA COUNTY SONS OF THE AMERICAN LEGION, in good standing. (Page 5)
2. Applicant must submit with this application an official high school transcript of student grades from the beginning of the 9th grade to due date of the application. The transcript may be photocopies that bear an original signature of the proper school authority. (page 3)
3. CEEB, SAT and ACT test scores or related equivalent, must be included, and may be photocopies. (page 3)
4. The applicant shall prepare a one-page essay summarizing his/her vocational or professional goals. (page 3)
5. The parent/guardian shall prepare a financial status statement provided with this folder. (Page 2)
6. A current dated, signed, one-page letter of recommendation from the applicant's high school principal, covering the applicant's ability, work habits, leadership personality, integrity; and citizenship. (Page 3)
7. A letter of endorsement from a responsible community leader (non-school) covering the applicant's service to the community through leadership and citizenship. (Page 3)
8. The applicant must present a letter of acceptance from the school he/she is planning to attend. (Page 3)
9. The student must demonstrate the following characteristics:
 - A. Respect for other people, religion, race and nationality.
 - B. Shows respect for adults in the school and community.
 - C. Shows respect for other students.
 - D. Demonstrates respect for public and personal property.
 - E. Demonstrates courtesy and good manners in the school and community.
 - F. Demonstrates reliability in completing school and academic requirements.
 - G. Contributes in a positive manner to the school's academic or co-curricular activities.
 - H. Has gained respect of the students and staff.
10. Applicant must be a citizen of the United States.

Mechanics:

1. Scholarship, citizenship, leadership and financial need are criteria by which the applicant will be judged.
2. Applications must be filed no later than April 15 of the year the student is graduating from high school.
3. Each AMERICAN LEGION POST will review its own applicants' essays and applications, picking one to be forwarded to the ONEIDA COUNTY AMERICAN LEGION Scholarship Committee for consideration. The COUNTY AMERICAN LEGION Scholarship Committee shall review the one essay and application from each post. All finalists shall be interviewed by the committee and the final selections shall be made.
4. Four scholarships in the amount of \$500.00 each shall be awarded. The announcement shall be made before high school graduation with the selected candidates being presented with a certificate at the ONEIDA COUNTY AMERICA LEGION Convention held during the month of June.
5. The actual award check for \$500 will be made upon the committee being presented a transcript showing first semester grades and attendance.

APPLICATION FOR ONEIDA COUNTY AMERICAN LEGION SCHOLARSHIP

ALL INFORMATION WILL BE HELD IN STRICT CONFIDENCE.

FAMILY INFORMATION

Name of Applicant: _____
(FIRST NAME) (M.I.) (LAST NAME)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Father / Guardian Occupation: _____ Employer: _____

Mother / Guardian Occupation: _____ Employer: _____

FINANCIAL DECLARATION:

1 - Parents combined IRS adjusted gross of previous year income.
From form 1040 line 31 or form 1040A line II. \$ _____

2 - Total size of parents' household: _____

First name and age of all individuals residing at above address:

Name	Age	Employer
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3 - How many will be in college during the next academic year? ____

Signature of Father / Guardian _____	Date _____
Signature of Mother / Guardian _____	Date _____
Signature of Applicant _____	Date _____

APPLICATION FOR ONEIDA COUNTY AMERICAN LEGION SCHOLARSHIP

NAME OF APPLICANT: _____
(FIRST NAME) (M.I.) (LAST NAME)

HIGHER EDUCATION INFORMATION

*** STUDENT APPLICANT INFORMATION**

SCHOOLS YOU HAVE APPLIED TO:

1ST. CHOICE. _____
(NAME AND LOCATION)

2ND. CHOICE. _____
(NAME AND LOCATION)

(EXPECTED ENTRY DATE) (EXPECTED DEGREE PROGRAM) (EXPECTED MAJOR & MINOR COURSES OF STUDY)

(OTHER SCHOLARSHIPS YOU HAVE APPLIED FOR)

(OTHER SCHOLARSHIPS YOU HAVE RECEIVED)

REFERENCES: (Please do not include Relatives)

Name	Address	Phone	Occupation
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*** ATTACHMENTS**

1. Letter of Recommendation from high school principal.
2. Letter of Recommendation from responsible community leader.
3. Official copy of high school transcript.
4. Copy of Scholastic Aptitude Test Scores.
5. ESSAY - In a one-page essay, indicate what your life goals are; what you hope to accomplish in the next five years; and, how you expect these accomplishments to help prepare you to achieve your life goals.

STUDENT SIGNATURE

My signature implies that all Student Applicant Information and Attachments are true to my knowledge. I understand that incorrect information may disqualify me from Scholarship consideration and / or Award.

STUDENT SIGNATURE

DATE

APPLICATION FOR ONEIDA COUNTY AMERICAN LEGION SCHOLARSHIP

*** STUDENT APPLICANT INFORMATION**

(LAST NAME) (FIRST NAME) (M.I.)

(MAILING ADDRESS) (CITY) (STATE) (ZIP.)

(_____) _____
(PHONE) (DATE OF BIRTH) (MALE) (FEMALE.)

(HIGH SCHOOL NAME AND LOCATION)

(GRADUATION DATE) (TYPE OF DIPLOMA)

HIGH SCHOOL EXTRA-CURRICULAR ACTIVITIES / HONORS:

WORK / VOLUNTEER ACTIVITIES:

COMMUNITY ACTIVITIES:

OTHER INTERESTS AND / OR HOBBIES:

WHY DO YOU MAKE THIS REQUEST FOR A SCHOLARSHIP?

Continued on next page.

APPLICATION FOR ONEIDA COUNTY AMERICAN LEGION SCHOLARSHIP

NAME OF APPLICANT: _____
(FIRST NAME) (M.I.) (LAST NAME)

WHAT ARE YOUR EDUCATION GOALS?

THE REASON YOU FEEL YOU SHOULD BE AWARDED THE AMERICAN LEGION SCHOLARSHIP?

WHAT DO YOU KNOW ABOUT ANY OF THE AMERICAN LEGION PROGRAMS?

OTHER COMMENTS:

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POST _____
HAS VERIFIED THE ELIGIBILITY OF THE APPLICANT.
HE/SHE IS ELIGIBLE THROUGH THE MEMBERSHIP IN
GOOD STANDING OF _____.
RELATIONSHIP TO APPLICANT _____

SIGNED _____
TITLE _____
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