



**AMERICAN LEGION AUXILIARY
NON-TRADITIONAL STUDENT SCHOLARSHIP
2020 APPLICATION**

Name of Applicant _____

Address _____

City _____ State _____ ZIP _____

Telephone No. _____ (Home) _____ (Cell)

Date of Birth _____

Email address _____

I am a member in good standing of:

_____ AMERICAN LEGION AUXILIARY

_____ THE AMERICAN LEGION

_____ SONS OF THE AMERICAN LEGION

Member # _____ Join Date: _____

Name of veteran through whom applicant is eligible for membership:

Relationship to Veteran _____

Attested: _____

(PostAdjutant/Unit Secretary)

SCHOLASTIC INFORMATION

Date Applicant graduated from high school: _____

Attach copy of high school transcript (if graduated in the last 10 years).

Has Applicant attended college? Last attended: _____

Attach copy of college transcript. _____ (mo/yr)

If it has been more than five years since applicant has attended school, submit work history.



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FINANCIAL INFORMATION

Applicant's Adjusted Gross Income \$ _____
(AGI: Tax Forms 1010 on Line 31; 1040A on Line 6e; 1040EZ on Line 4.)

List support or income from any other sources:

Number of dependents: _____

Describe any circumstances that may affect your or your family's ability to provide for your college education. (Attach additional sheets if necessary)

CHARACTER/LEADERSHIP

Attach additional sheets if necessary.

Describe any community service activities in which you have participated during high school, college or career.

List offices held and/or awards received:



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INITIATIVE/GOALS

What major do you plan to pursue when you enter college? _____

Why have you selected this major? _____

What college or university do you plan to attend? Name _____

City _____ State _____

Why did you select this school? _____

Who or what inspired you to seek a college degree? _____

Signed: _____

Date: _____

NOTE: Please attach to this application all required materials listed on the following page, and submit it as one document to the President of the American Legion Auxiliary unit in which your membership is recorded NO LATER THAN MARCH 1, 2020.



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APPLICATION PACKET REQUIREMENTS

1. Completed application packet for the Non-Traditional Student Scholarship.
2. Copy of applicant's high school or college transcript(s), if applicable.
3. Applicant's work history, if applicable.
4. A copy of the applicant's FAFSA (Free Application for Federal Student Aid) form, or a copy of the FAFSA Summary Report and Confirmation Page, or the FAFSA Student Aid Report (SAR).
5. Please be sure to attach all required materials to this application and submit it as one document to the President of the American Legion Auxiliary unit in which your membership is recorded NO LATER THAN MARCH 1, 2020.



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THIS PORTION TO BE COMPLETED BY THE SUBMITTING UNIT

(PLEASE TYPE OR PRINT)

EACH UNIT WILL BE RESPONSIBLE FOR VERIFYING ALL NECESSARY INFORMATION IN THE APPLICANT'S PACKET.

1. Judging, at all levels, shall be on the following basis:

Character/Leadership	25%
Initiative/Goals	25%
Financial Need	25%
Academic Achievement	25%

2. No unit may enter more than one candidate in the department competition.

3. The selected entry for each unit shall be certified by the American Legion Auxiliary unit president and unit secretary or unit Education chairman.

4. The selected entry for each unit should be forwarded to the department secretary for competition at the state level to be received ON OR BEFORE MARCH 15, 2020.

5. Participation in this scholarship program shall be on a voluntary basis in all units.

6. Should an entry be received and no unit affiliation is available, then the application should be judged in the department (state) headquarters unit.

Unit Name and Number _____

Address _____

City, State, ZIP _____

Signature of Unit President

*Signature of Unit Secretary or
Unit Education Chairman*



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THIS PORTION TO BE COMPLETED BY THE DEPARTMENT (STATE)

(PLEASE TYPE OR PRINT)

EACH DEPARTMENT WILL BE RESPONSIBLE FOR VERIFYING ALL NECESSARY INFORMATION IN THE APPLICANT'S PACKET.

1. Judging, at all levels, shall be on the following basis:

Character/Leadership	25%
Initiative/Goals	25%
Financial Need	25%
Academic Achievement	25%
2. Each department is restricted to submitting one candidate to the division competition.
3. The selected entry for each department shall be certified by the American Legion Auxiliary department president and the department secretary or department Education chairman.
4. The selected entry for each department shall be forwarded to the respective division Education Chairman for competition at the national level so it's received **ON OR BEFORE APRIL 1, 2020.** Contact information for the division Education chairmen is located in the Education Annual Supplement to the Programs Action Plan, located on the Education program page in the Members Only section at www.ALAforVeterans.org.
5. Participation in this scholarship program shall be on a voluntary basis in all departments.

DEPARTMENT _____

DIVISION _____

Signature of Department President

*Signature of Department Secretary or
Department Education Chairman*

The division Education chairman and two qualified judges shall make the final decision on the winner. The division Education chairman shall certify the name of the winner and send the winner's complete application packet to the National Education Chairman **on or before April 15, 2020.** The National Education Chairman shall certify the names of all winners to National Headquarters.