

American Legion Scholarship

Objective:

The aim of the Legion Scholarship is to reward and encourage a senior or alumni of Hobson High School to attend any accredited university or college.

Award:

5 scholarships, \$500 each

Preference will be given to students based on the following:

- GPA
- Need
- Community Service
- Extra-Curricular Activities
- Military Background in Family

Selection:

The scholarship application will be reviewed by the American Legion members in Hobson, MT.

Rules:

This scholarship must be used at an accredited college or university.

The student must start the course of study at the university or college in the fall of the same year that scholarship is awarded.

Required Documents:

- Current resume including work experience and extra-curricular activities
- A one page essay stating the purpose in going to college, accomplishments that have provided the greatest satisfactions, and reason(s) why he or she should be chosen as the recipient of this award.
- **Completed** Application.
- Copy of current college transcript with GPA.

Due Date:

April 15th to the school counselor.

AMERICAN LEGION SCHOLARSHIP

APPLICATION FOR RENEWAL – (Post Graduates)

(Must be received by April 15 by Hobson Counselor)

NAME: _____

DATE: _____

ADDRESS: _____

HS GRADUATION DATE: _____

(Town)

(State) (Zip)

(Telephone)

PARENTS' NAME(S): _____

PARENTS' OCCUPATION(S): _____

I. POST-SECONDARY EDUCATION: (Please complete this section with information pertaining to the University, College, or Vocational School you are attending or plan to attend.)

A. School attended during CURRENT school year:

1. Name of School: _____

2. Location: _____

3. Course of study: _____

4. Degree to receive: _____

5. Length of time to complete program: (years) _____

B. School you PLAN to attend this upcoming school year:

1. Name of School: _____

2. Location: _____

3. Course of Study: _____

4. Degree to receive: _____

5. Length of time to complete program: (years) _____

C. Post-Secondary Costs for One (1) Academic year: (3 Qtrs./2Sems)

- 1. Tuition and Fees \$_____ (per academic yr.)
- 2. On-campus housing: \$_____ (per academic yr.)
- 3. On-campus meals: \$_____ (per academic yr.)
- 4. Books/Supplies: (est.) \$_____ (per academic yr.)
- 5. Other: _____ \$_____ (per academic yr.)
_____ \$_____ (per academic yr.)
- 6. Total Costs: \$_____ (per academic yr.)

D. Family Contribution: (Percentage % of family financial support available to reduce the total cost of one academic year)

- 1. Family _____%
- 2. Student _____%

II. UNIVERSITY, COLLEGE, or VOCATIONAL SCHOOL Cumulative Grade Point Average.

A. G.P.A. = _____ THROUGH _____ (Date)

B. You must submit your current transcript (can be unofficial or official) along with your application.

III. UNIVERSITY, COLLEGE, VOCATIONAL SCHOOL ACTIVITIES.

(List activities, years involved in activities and any leadership positions held in activities.)

<u>Activity</u>	<u>Years</u>	<u>Leadership Position(s)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please use the other side of this page if additional space is needed.

IV. HONORS /AWARDS: (School and Community – After High School))

<u>Honors/Awards</u>	<u>Organization/Activity</u>	<u>Year(s)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IV. COMMUNITY INVOLVEMENT: (After High School)

<u>Activity</u>	<u>Organization/Activity</u>	<u>Year(s)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

VI. COMMENTS:

IV. FINAL CRITERIA

Certification: We certify the information contained in this application to be true and complete to the best of our knowledge. We understand the American Legion Scholarship Committee may, at its discretion, deny this application for a scholarship if this application contains any false or incomplete statements.

Signature of Applicant: _____ Date: _____

THIS APPLICATION MUST BE RECEIVED by Counselor no later than April 15th.