



AMERICAN LEGION AUXILIARY
Department of New Hampshire
MARION J. BAGLEY AWARD
A \$1,000.00 Award



Name _____ Date of Birth _____

Address _____

Telephone _____ E-mail _____

Name of high school _____

Address _____

Resident of New Hampshire for _____ years Date of graduation _____

College or school applicant desires to or is currently attending; and course of study he or she plans to pursue or is pursuing.

RULES:

1. Applicant must be in his or her senior year or a graduate of an accredited high school or equivalent, or attending an institution of higher learning.
2. Applicant must be a resident of New Hampshire or be a member of a Unit of the American Legion Auxiliary, Department of New Hampshire for three (3) consecutive years including the current membership year and maintain membership through at least the award year.
3. Application must be accompanied by three (3) letters of recommendation including the name, address, and telephone number of the person writing the recommendation.
 - A: One (1) from a high school or college teacher or guidance counselor.
If not in high school, a letter from your employer is acceptable;
 - B: Two (2) from adult citizens, other than relatives
4. Application must include a list of any church, school, or community activities or organizations in which you are or have participated; including any offices held.

5. Applicant must write an original essay, not to exceed 1000 words, on "My Obligations as an American."
6. Application must include a certified transcript or photocopy of high school, or school of higher learning grades, or GED.
7. Award must be used at an accredited institution of higher learning or at a professional or technical school awarding a certificate, diploma or degree upon completion.

RESOURCE SECTION (Must be fully completed.)

Name of Parent(s) or Guardian(s) _____

Father's employer _____ Annual Income \$ _____

Mother's employer _____ Annual Income \$ _____

Number of children in family: Under 18 _____ Over 18 _____ Attending college _____

College expenses:	Tuition and Fees	\$ _____
	Room and Board (on campus)	\$ _____
	Commuting expenses (off campus)	\$ _____
	Books and Supplies	\$ _____
	Personal expenses	\$ _____
	Other (specify) _____	\$ _____
TOTAL EXPENSES		\$ _____

Resources as of Feb. 30 th :	Student Contribution	\$ _____
	Parent(s) Contribution	\$ _____
	Scholarships and Grants received	\$ _____
	College work study	\$ _____
	Other (specify) _____	\$ _____
TOTAL RESOURCES		\$ _____

I certify that the above information is true and accurate to the best of my knowledge.

Student's Signature _____ Date: _____

Parent or Guardian Signature _____ Date: _____

DEADLINE: March 15

SEND TO: American Legion Auxiliary
Department of New Hampshire
21 S. Fruit Street Suite 266
Concord, NH 03301-2428