



**American Legion Auxiliary Unit #5**  
**32 Linden Street**  
**Brattleboro, VT 05301**

**SCHOLARSHIP APPLICATION INSTRUCTIONS**

1. All applicants must complete Sections I and III.
2. Section II must be completed for dependent applicants.
4. Incomplete applications will not be considered for scholarship awards. If a section does not apply, please mark that section as not applicable.
5. Applications received in hand or postmarked after the deadline date will not be considered.
6. Please submit completed applications by the deadline date to:

American Legion Auxiliary Unit #5  
Attn: Scholarship Committee Chair  
32 Linden Street  
Brattleboro, VT 05301



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**32 Linden Street**  
**Brattleboro, VT 05301**

**SCHOLARSHIP APPLICATION**

*(To Be Completed by Applicant)*

**DEADLINE FOR SUBMISSION: JUNE 1**

**SECTION I:**

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_  
TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ANNUAL GROSS INCOME: \_\_\_\_\_

**SECTION II:** *(To be completed for dependent applicants ONLY. Non-dependent applicants continue with Section III)*

FATHER OR GUARDIAN'S NAME: _____	MOTHER OR GUARDIAN'S NAME: _____
OCCUPATION: _____	OCCUPATION: _____
ANNUAL GROSS INCOME: _____	ANNUAL GROSS INCOME: _____
AMOUNT YOU WILL PAY TOWARD APPLICANT'S EDUCATION EXPENSES: _____	AMOUNT YOU WILL PAY TOWARD APPLICANT'S EDUCATION EXPENSES: _____

**SECTION III:** *(Answer all questions as completely as possible. Use the back of form or additional sheets as necessary.)*

1. Are you, your parent(s) or your grandparent(s) a Veteran? If yes, give name(s).
2. Are you, your parent(s) or your grandparent(s) a member of the American Legion, the American Legion Auxiliary, or the Sons of the American Legion? If yes, give name of person(s) and Post, Unit, or Squadron of Membership.
3. How many brothers/sisters do you have? What are their ages?
4. Are any of your siblings currently attending college?

5. List any school offices you have held.
6. List the school activities/sports in which you have participated.
7. Which schools have you applied to?
8. Which schools have you been accepted to?
9. What career field is your planned major of study?
10. How much of your anticipated tuition and other educational costs have YOU saved?
11. How many scholarships, including this application, have you applied for?
12. State the reason(s) why you need financial assistance for your education?
13. Write a paragraph on why you want to continue your education. (Use back of form or additional sheets as necessary.)

I certify that the foregoing information is correct and true to the best of my belief and knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Father/Guardian Signature *(If Applicable)*

Date: \_\_\_\_\_

\_\_\_\_\_  
Mother/Guardian Signature *(If Applicable)*