



AMVETS LADIES AUXILIARY 845 \$1000.00 SCHOLARSHIP

POSTMARKED DUE DATE:

Due to Mrs. Trexler by April 8

This Scholarship Application is for any East Rowan or Carson High School Senior. The Scholarship Committee will judge the applications upon their return, and the winner will be notified by the Guidance Counselor and also from the Chairperson of the Scholarship Committee or the AMVETS Ladies Auxiliary President.

The application must be submitted to the Guidance Office or mailed to the return address on this application by the above due date.

We, are a Veteran's Organization and WE hope that the applicant will address in their resume or application any community service He or She has participated in and whether they have a family member who is a Veteran.

ELIGIBILITY:

1. Must be a graduating senior of East Rowan or Carson High.
2. Must be seeking financial aid to attend an accredited college, university, or technical school.

REQUIREMENTS:

1. Completed and signed application.
2. Essay of 200 - 400 words on "where I see myself in five years".
3. Three letters of recommendation.
4. Signed transcript from school.
5. Signed copy of the Application, Privacy Act Form, Release Information Form.

JUDGING CRITERIA

1. Personality - 15%: Based on three letters of essay or Recommendation.
2. Scholarship - 30%: School Transcript
3. Essay - 15%
4. Financial Need - 40%: Application Information.

APPLICATION AND REQUIRED INFORMATION MUST BE SUBMITTED TO THE SCHOOL GUIDANCE COUNSELOR OR MAILED TO THE ROCKWELL AMVETS LADIES AUXILIARY SCHOLARSHIP CHAIRMAN AND MUST BE POSTMARKED ON THE SPECIFIED DATE ABOVE.

Judging will be made by the Scholarship Committee at the Rockwell AMVETS Ladies Auxiliary. The Winner will be notified, as well as the school's guidance's office. Payment of the Scholarship Money will be Paid to the Scholarship recipient's accredited school, college, or university.

SEND APPLICATION AND REQUIRED DOCUMENTS TO:

Pat Vanhoy Local Scholarship Chair
P.O.Box 512
Rockwell, NC 28138 or email (PatVanhoy@icloud.com)

If you have any questions, you may contact the Scholarship Chair of the Rockwell AMVETS Ladies Auxiliary 845.

THANK YOU FOR YOUR PARTICIPATION.



**SCHOLARSHIP APPLICATION
ROCKWELL AMVETS LADIES AUXILIARY 845**

This form must be filled out completely and signed.

Legal Name _____
Last First Middle

Date of Birth _____ Martial Status _____

Home Address _____
Street City State Zip Code

Phone _____
Home Cell

School _____

Graduation Date _____

GPA: Weighted _____ ACT and/or SAT Score _____

Unweighted _____ Class Rank _____

Applicant's Employer/Income _____

Name/Address of College or Technical School you will be attending _____

Parents Information

Father
Name _____ Employer _____
Income _____

Mother
Name _____ Employer _____
Income _____

Guardian/Spouse Information

Name/Relationship _____

Income _____

Please List the Following (use back of form or attachment if needed)

Sports and/or Clubs and Community Service:

Honors, Awards, Achievements and Scholarships Awarded

CERTIFICATION: I/we certify that all information on this application is true, complete, and accurate to the best of my/our knowledge. Any false information will be cause for denial or withdrawal of the scholarship offered.

PRIVACY ACT: Applicant should review information requested – None of the information is required by law and is, therefore, disclosed voluntarily. It will be used in considering the applicant for the scholarship, publicity and related purposes. Not providing all or part of the requested information may result in an applicant not being fully considered for the award.

AUTHORIZATION TO RELEASE INFORMATION: Except as specified below, all personal information contained in my application for the **ROCKWELL AMVETS LADIES AUXILIARY** may be used by the award sponsor for promotion and publicity purposes.

Signature of Applicant

Date