

2008 AMERICAN LEGION MARTIN HORN POST 66 SCHOLARSHIP

GUIDELINES

1. APPLICANT MUST BE A GRADUATING SENIOR OF HOLDREGE HIGH SCHOOL.
2. APPLICANTS MUST BE SONS OR DAUGHTERS, GRANDCHILDREN, ADOPTED OR STEPCHILDREN, OF MEMBERS OF THE UNITED STATES ARMED FORCES, OR HONORABLY DISCHARGED MEMBERS, OR MIA, KIA, OR POW. SPECIAL CONSIDERATION TO THOSE WITH AMERICAN LEGION AFFILIATION.
3. STUDENT MUST CARRY A MINIMUM OF 2.50 GPA AND BE IN THE TOP 50% OF THEIR CLASS.
4. MUST BE ENROLLED OR IN THE PROCESS OF ENROLLING AS A FULL TIME STUDENT IN AN INSTITUTION OF HIGHER EDUCATION. TO INCLUDE, UNIVERSITY, COLLEGE, TECHNICAL SCHOOL, PUBLIC OR PRIVATE.
5. TWO SCHOLARSHIPS PER YEAR WILL BE GIVEN FOR THE AMOUNT OF \$600.00 EACH.
6. THE SCHOLARSHIP SHALL BE PAID IN TWO INSTALLMENTS, AT THE BEGINNING OF EACH SEMESTER. PAYMENT WILL BE MADE DIRECTLY TO THE INDIVIDUAL UPON RECEIPT OF PROOF OF ENROLLMENT.
7. APPLICATION MUST BE COMPLETED AND RETURNED BY **APRIL 23, 2008**. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED, QUESTIONS MUST BE ANSWERED OR N/A (NOT APPLICABLE) INDICATED.
8. APPLICATIONS FORMS ARE TO BE SENT TO:
MIKE MCMINAMEN
HOLDREGE HIGH SCHOOL
600 12TH AVE.
HOLDREGE, NE 68949
9. AN IMPARTIAL AWARD SELECTION COMMITTEE WILL EVALUATE ALL APPLICATIONS AND SELECT RECIPIENT.
10. SCHOLARSHIP MUST BE USED ON THE ACADEMIC YEAR BEGINNING 2008. IN CASES OF UNUSUAL CIRCUMSTANCES OR EMERGENCIES, RECIPIENT MAY APPEAL, TO REQUEST DELAYS IN THE USE OF AN AWARD.

APPLICATION

APPLICANT'S NAME _____ DATE OF BIRTH _____

ADDRESS _____ PHONE NO. _____

PARENT OR LEGAL GUADIAN'S NAME _____

ADDRESS _____ PHONE NO. _____

PARENT OR GRANDPARENT WHO IS OR WAS A MEMBER OF UNITED STATES ARMED

FORCES. _____ RELATIONSHIP W/APPLICANT _____

BRANCH OF SERVICE SERVED _____ SERVICE DATES _____

MEMBER OF AMERICAN LEGION? _____ IF YES LEGION POST NUMBER _____

LOCATION OF LEGION POST _____

TO BE COMPLETED BY HIGH SCHOOL OFFICIAL

AS OF COMPLETION OF 1ST SEMESTER 2007-2008 SCHOOL YEAR

GRADE POINT AVERAGE _____ CLASS RANKING _____

ACT OR SAT SCORE _____

SIGATURE OF SCHOOL OFFICAL _____ DATE _____

SCHOOL OFFICAL NAME (PRINT) _____

SCHOOL SEAL HERE:

WHAT FIELD OF STUDY ARE YOU PLANNING TO ENTER AND WHAT ARE YOUR CAREER GOALS?

WHAT SCHOOL DO YOU PLAN TO ATTEND?

LIST ANY HONORS AND AWARDS RECEIVED IN SCHOOL.

LIST ANY OFFICES HELD IN CLASS OR SCHOOL ORGANIZATIONS IN HIGH SCHOOL.

LIST EXTRA CURRICULAR ACTIVITIES IN WHICH YOU PARTICIPATED IN HIGH SCHOOL.

LIST OUT OF SCHOOL ORGANIZATIONS, ACTIVITIES, AND VOLUNTEER SERVICES.

LIST LAST TWO EMPLOYERS;

NAME: _____

NAME: _____

CONTACT: _____

CONTACT: _____

PHONE NO. _____

PHONE NO. _____

LIST OTHER SPECIAL INTERESTS & HOBBIES.

ATTACH RECENT PHOTOGRAPH