

AMERICAN LEGION AUXILIARY – DEPARTMENT OF SOUTH DAKOTA \$500 SCHOLARSHIP FOR COLLEGE/UNIVERSITY OR TECHNICAL INSTITUTE

Objective: South Dakota American Legion Auxiliary shall award annually two \$500 scholarships for a college/university and two \$500 scholarships for technical institutions, in order to further education beyond high school level.

Eligibility: The applicant shall be

- a. the child or grandchild of a veteran, or the child or grandchild of a member of the American Legion Auxiliary.
- b. not under sixteen (16) nor over twenty-two (22) years of age.
- c. financially unable to attend a university or technical institute after graduation from high school.
- d. a resident of South Dakota.
- e. a first time winner of this award; an applicant who has previously been awarded this scholarship is ineligible.

Requirements:

The applicant shall submit

- a. Original article of not more than 500 words on "Why I want to attend a College/University" or "Why I want to attend a Technical Institute."
- b. Copy of high school or current college/ university/technical institute grades.
- c. Completed application, stating actual need of financial assistance.
- d. All required documents to Department Education Chairman, postmarked by March 1.
- e. Letters of Recommendations as listed below.

Letters of Recommendation:

The applicant shall submit three (3) letters of recommendation;

- a. one letter from a member of the local American Legion Auxiliary.
- b. one letter from a school administrator from school he/she will graduate or currently attends, or clergy of the church he/she attends.
- c. one letter from a business person or representative citizen who knows him/her in community/home life.

Letters of recommendation shall include statements of:

- a. Character giving standards of conduct, strength of character, adherence to truth and conscience, devotion to church and daily duties.
- b. Americanism fine ideals, love of country.
- c. Activities describing activities of church, school, organizations or community leadership ability, work history and personal magnetism.

Awards:

- a. The Department Education Chairman of American Legion Auxiliary, with qualified judges chosen by her, shall make the final selections. Entries shall be judged, and winners selected, using the following criteria: Character, 30%; Americanism, 10%; Leadership, 10%; Academics, 20%; Basis of Need, 30%.
- b. The committee shall select alternates for each award, in the event the winners cannot execute his/her plans.
- c. Winners will be notified by mail.
- d. In the event the applicant is awarded a National scholarship and a South Dakota scholarship, or two South Dakota scholarships, he/she must relinquish the lesser of the two scholarships to his/her alternate.

Application forms

- a. May be secured from the Department Education Chairman or Department Headquarters.
- b. Are mailed to Department Education Chairman on or before March 1.

Mail to:

JaKelle Hardy

PO Box 32

Lanford, SD 57454

Phone (605) 593-6639

Verification of receipt of student application may be obtained by enclosing a self-addressed, stamped envelope with the application.

AMERICAN LEGION AUXILIARY ---- DEPARTMENT OF SOUTH DAKOTA Application for either \$500 College/University or \$500 Technical Institute Scholarship

Name of applicant		Date of birth	
Name of father		Mother	
Grandparent		_ (Fill in only the name of the person who gives you eligibility)	
Date of father'	s, mother's or grandparent's enlis	stment	
Discharge date	and place		
If applying as a	an Auxiliary member's child, giv	e the American Legion Au	uxiliary Unit Name and number to which
member belong	gs		
Number of children in family ages		number in college	
Occupation of	father, step-father or guardian		income
Occupation of	mother, step-mother or guardian		income
Social Security	, government compensation or pe	ension you receive	
Will you be eli	gible under another government	program?	Amount
Have you appl	ied for or been awarded another s	cholarship? Name/	Amount
High school fro	om which you will, or have gradu	nated	Date
Name and add	ress of College/University or Tec	hnical Institute you wish t	o attend:
2. 3. 4. 5.	Completed application Essay on "Why I want to attend Institute." Copy of high school grades or e Mail on or before March 1 Three letters of recommendatio a. A member of the Am b. School administrator	educational institution you n from: erican Legion Auxiliary or clergy nan, or a representative cit	cizen Phone
City		State	Zip

Mail to Department Education Chairman JaKelle Hardy PO Box 32 Langford, SD 57454 Phone 605-493-6639