The American Legion
Department of Pennsylvania
P.O. Box 2324
Harrisburg, PA 17105-2324
www.pa-legion.com 717-730-9100 fax 717-975-2836

For God and country

Scholarship and Endowment Application Information

1. Membership in The American Legion must be documented by one of the following methods:
   - Photocopy of current membership card
   - Letter on Post stationery by Post Commander, Adjutant or Finance Officer attesting to person's membership in good standing including length of years. If deceased, a statement that the person was a member in good standing at the time of their death.

2. If killed in action or missing in action is claimed, documentation from the U.S. Department of Defense must accompany the application.

3. No spaces on the application are to be blank. If there is no information, mark the space N/A (Not Applicable).

4. Please send a copy of **current transcript** along with a copy of SAT scores by May 30th. Remember, not sending a transcript and SAT scores can prevent the application from being considered.

5. Statement of parent(s) income may be a W-2 or a photocopy of the first page of a 1040 form.

6. School of choice must be entered along with full address of the school. **(Attending school must be in the State of Pennsylvania).**

7. Anyone wishing to apply for a scholarship allowance is required to submit an application to the Department on or before May 1st in order to receive consideration for the following September. **(You must be a current senior in a Pennsylvania High School).**

8. The amount of the Scholarship Grand award may vary from year to year depending upon the availability of funds and the number of awards granted by the committee.

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Scholarship Application
Joseph P. Gavenonis
Plan I, the Four (4) Year Program

Applicant Information

Name of Applicant _____
(Last, First, Middle)

Address _____
(Street, City, State, Zip)

Phone Number _____

Place of birth _____ Date of birth _____
(City, State) (mm/dd/yy)

Social Security Number _____

Parent Name(s) _____

Member of Post # _____ in _____ for _____ years

Member ID # _____** Please submit copy**

Annual income of Parent(s) _____

Statement attached Yes _____ No _____ (W2 or 1040)

Brothers/Sisters (Name and Ages) _____

_____

_____

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High School Information

High School Attending _____

High School Address _____
(Street, City, State, Zip)

Date of Graduation _____

Extra-Curricular Activities _____

_____

_____

College or University Information

College or University you desire to enter _____

Have you been accepted for admission? Yes _____ No _____

Entry Date _____ Major course of study _____

Years to Complete Degree _____

Cost per year: Tuition $ _____ Books $ _____

Residence $ _____ Other $ _____

College entrance exam taken: Yes_____ No _____ SAT Score _____

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Financial Aid Information

PHEAA applied for: Yes _____ No _____ Amount awarded $ _____

Do you plan to work while attending school? Yes _____ No _____

Expected income from Work $ _____

Does applicant have a trust fund? Yes _____ No _____

If so, what amount $ _____

Parental financial help? Yes _____ No _____ Amount per years $ _____

Other income: _____ Amount $ _____

_____

The following data must accompany this application:

1. Certified Copy of death certificate (if applicable).
2. Transcript of most recent grades
3. Current American Legion membership (include copy of current card).
4. Statement of annual income of parent(s)

Signature of applicant _____ Date _____

Application deadline is May 30th
Must be postmarked no later then the above date to be accepted

Please complete application and return to: Pennsylvania American Legion
Scholarship Endowment Fund
P.O. Box 2324
Harrisburg, PA 17105-2324