





<u>2016</u> <u>DEPARTMENT OF PENNSYLVANIA</u> <u>AMERICAN LEGION</u> <u>WOOD BADGE SCHOLARSHIP APPLICATION</u>

I. SCHOLARSHIP INFORMATION

- A. This scholarship program provides opportunities for the following Wood Badge courses:
 - **Scout Leader Wood Badge** A weekend (or weeklong) advanced Scout leader training program involving an in-depth study of Scouter leadership skills.
- B. There shall be awarded annually one (1) **Wood Badge** scholarship for each American Legion section *(Eastern, Central and Western)*.
- C. Scholarships will be in the amount of \$ 175.00.
- D. Applicants must satisfy ALL Wood Badge course pre-requisites.
- E. Applicants must be member of American Legion, Auxiliary or S.A.L.
- F. APPLICATIONS MUST BE SUBMITTED TO DEPARTMENT HEADQUARTERS BEFORE:

MARCH 1, 2016

G. RETURN TO:

THE AMERICAN LEGION DEPARTMENT OF PENNSYLVANIA

P.O. BOX 2324

HARRISBURG, PENNSYLVANIA 17105-2324

II. <u>APPLICATION</u> (PLEASE PRINT/USE ADDITIONAL SHEETS IF NECESSARY)

I wish to be considered for a Wood Badge Scholarship to attend the following Wood Badge Training			
<i>COURSE:</i>	CIRCLE TYPE COURSE: Weekend Week Long		
DATES OF COURSE:	COST:		
LOCATION OF COURSE:			
COUNCIL SPONSORING COURSE:			

A. <u>PERSONAL INFORMATION:</u>

NAME:	TELEPHONE: ()	
ADDRESS:		
<i>CITY:</i>		ZIP:
OCCUPATION:		
EMPLOYER:		
WORK ADDRESS:		
WORK TELEPHONE: ()		

B. AMERICAN LEGION, AUXILIARY OR S.A.L. MEMBERSHIP INFORMATION

CIRCLE UNIT MEMBERSHIP:	LEGIONNAIRE	AUXILIARY		S.A.L.
UNIT NUMBER: POST	NAME:			
<i>CITY</i> :	STATE:			
LEGION DISTRICT NUMBER:	SECTION (CIRCLE):	Eastern	Central	Western

AMERICAN LEGION, AUXILIARY AND S.A.L. OFFICES HELD: _____

2015 MEMBERSHIP CARD NUMBER: NUMBER OF YEARS OF CONTINUOUS SERVICE:

LOCAL AMERICAN LEGION POST COMMANDER OR ADJUTANT'S CERTIFICATION:

TITLE:

_____ (SIGNATURE REQUIRED) DATE: _____

C. MEMBERSHIP IN OTHER ORGANIZATIONS:

D. SCOUTING BACKGROUND INFORMATION NUMBER OF YEARS IN SCOUTING: YOUTH: ____ ADULT: ____ SCOUTING POSITIONS HELD AS YOUTH: _____

HIGHEST RANK ATTAINED AS YOUTH: SIGNIFICANT SCOUTING ACCOMPLISHMENTS AS A YOUTH:

CURRENT PRIMARY ADULT SCOUTER POSITION: _____ OTHER ADULT SCOUTER POSITIONS HELD: _____

ADULT AWARDS RECEIVED: _____

ADULT TRAINING EXPERIENCES:

E. PERSONAL PLEDGE

If awarded this **Wood Badge** Scholarship, on my honor as a Scouter, I will participate in the **Wood Badge** experience indicated on this application, and further agree to aid my local Boy Scout council with it's leadership training programs through the instruction and coaching of others upon my return from this Wood Badge course.

APPLICANT SIGNATURE: _____ DATE: ____

III. LOCAL SCOUTING COUNCIL CERTIFICATION

(STATEMENT BY LOCAL SCOUT COUNCIL SUGGESTING WHY THIS APPLICANT SHOULD BE CONSIDERED FOR A WOOD BADGE SCHOLARSHIP. PLEASE INDICATE IF THE APPLICANT HAS SATISFACTORILY COMPLETED THE PRE-REQUISITES FOR THE COURSE. USE ADDITIONAL SHEETS IF NECESSARY.)

COUNCIL NAME:	DATE:
COUNCIL ADDRESS:	
TELEPHONE: ()	
IELEF HUNE; ()	

SIGNATURE OF COUNCIL REPRESENTATIVE: _____ *TITLE:* ______