The Doctor Almo J. Sebastianelli Scholarship is available to any senior residing in Pennsylvania who meets the following criteria:

- A child or grandchild of a Pennsylvania Legionnaire in good standing.
- A child or grandchild of a deceased Pennsylvania Legionnaire.

To be eligible a student must be a member of a high school band who is going on to higher education majoring in music. The Student needs to include his/her current high school transcript.

The higher education school must be in Pennsylvania, letter of college acceptance must be included.

Selection will be made by the members of the committee. One winner will be selected to received a $500.00 scholarship. Anyone wishing to apply is required to submit an application on or before May 1st of current year in order to receive consideration for the following September to

The American Legion,
Department of Pennsylvania,
800 N Front St,
Wormleysburg, PA 17043
717-730-9100
www.pa-legion.com
Application

Name of Applicant_______________________________________________________DOB_______________________________

Address____________________________________________________________________________________________________

City/State/Zip____________________________________________________________________________________________________

Phone________________________

Parent/Guardian Name(s)____________________________________________________________________________________

Person through whom applicant is eligible for scholarship________________________________________________________

Relation to applicant________________________________________________________________________________________

Is this person deceased? YES       NO       If yes, please attach a certified copy of the death certificate.

If no, please list current PA American Legion Membership ID Number______________________________________________

Name of High School________________________________________________________________________________________

Location of High School_____________________________________________________________________________________

Name of Band Teacher_______________________________________________________________________________________

Band Teacher Phone #______________________________   or   Email_______________________________________________

College/University you desire to enter__________________________________________________________________________

Location of college/university (city/state)_______________________________________________________________________

Have you been accepted for admission? YES  NO  Date of entry______________________________

Major course of study_________________________________________Number of years to complete______________________

Please complete this application in its entirety and attach current high school transcript and letter of college acceptance.

Return application to:

The Pennsylvania American Legion
PO Box 2324
Harrisburg, PA  17105-2324
Phone (717) 730-9100   Fax (717) 975-2836

DEADLINE DATE FOR ENTRIES IS MAY 1, 2020