

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

Scholarship and Endowment Application Information

- 1. Children or Grandchildren of PA Legion members who are deceased, ICU, or MIA or has a Parent or Grandparent who has been in the military or is the military member in good standing in The American Legion are eligible.
 - A. 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 attach a copy of current transcript along with a copy of SAT scores. 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 31, 2019 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 Grant 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 Robert W. Valemont Plan II, the Two (2) Year Program

Applicant Information	on			
Name of Applicant	(Last, First, Middle)			
	,			
Address	(Street, City, State, Zi	ip)		
Phone Number				
Place of birth		Date of birth		
	(City, State)			(mmddyy)
Social Security Number	er			
Parent Name(s)				
Member of Post #	is		for	years
Member ID #			** Pleas	se submit copy*
Annual income of Parei	nt(s)			
Statement attached Yes		INT o		(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: YesNoSAT Score

Scholarship Application Robert W. Valemont Plan TI, the Two (2) Year Program Page 3

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. Transcript of most recent grades 2. Current American Legion membership (include copy of current card). 3. Statement of annual income of parent(s) ** Please note this application is for a student who is seeking a career oriented education or training in a less than four year program in a Pennsylvania school. ** Signature of applicant ______ Date _____ Application deadline is May 31, 2019 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