AMVETS

AMVETS National Ladies Auxiliary

SCHOLARSHIP

GUIDELINES AND ELIGIBILITY

The AMVETS National Ladies Auxiliary Scholarship has been established to recognize and reward need, academic achievement and potential of students; to stimulate recruitment of well qualified candidates for careers in our society today; and to reflect the interest and involvement of a National Service Organization and its members. Scholarships will be judged and awarded at the National Convention, held during the month of August. A possible total of (2) \$1,000 scholarships and up to (5) \$750 scholarships may be awarded at that time.

The applicant must be a current member of the AMVETS Ladies Auxiliary or a son/daughter, step son/daughter or grandchild, step grandchild of a current member of the AMVETS Ladies Auxiliary and be in at least his/her second year of undergraduate study at an accredited college or university.

CHECK LIST OF REQUIREMENTS
The applicant must submit a resume of not more than 500 words nor less than 200 words about himself/herself. It should include past accomplishments, career and educational goals, and objectives for the future.
Three (3) letters of recommendation (excluding family members) must be signed and dated (within one year of the date of application) by writers, PDF verified signatures are acceptable.
Authorized copy of his/her most current transcript with accumulative grade average and an explanation of the grading system must be received in a sealed envelope.
Copy of Ladies Auxiliary member's current membership card.
Completed copy of the Application Form.
Signed copy of the Privacy Act Form.
If changing schools a letter of acceptance, on official school letterhead, from an accredited college or university is required.

**ALL APPLICATIONS MUST BE POSTMARKED NO LATER THAN JULY 1.

**EVERY LINE MUST BE COMPLETED. WRITE N/A IF NOT APPLICABLE TO YOU.

**IF ALL REQUIREMENTS ARE NOT MET, THIS APPLICATION SHALL NOT BE CONSIDERED.

JUDGING CRITERIA

Criteria for judging the elements in the candidate's dossier will be considered as follows:

NEED: 45% The information on the application form regarding the financial status of the applicant, the

family, and the actual need of the applicant

SCHOLARSHIP: 15% Scholastic transcript of semester average for all courses taken in previous semester(s) with

an explanation of the grading system

AIM: 25% The student paper (maximum 500 words; minimum 200 words)

PRESENTATION: 15% Three (3) letters of reference as to student potential in regards to specialized field; must be

signed and dated by the writer, PDF verified signatures are acceptable

APPLICATION PROCESS

Applications must be sent to the AMVETS National Ladies Auxiliary Headquarters and postmarked not later than July 1. Transcripts must be postmarked by July 1. Applications will be disqualified if received after the deadline. All applications should be sent to:

AMVETS National Ladies Auxiliary Headquarters ATTENTION: SCHOLARSHIP OFFICER 4647 Forbes Boulevard Lanham, MD 20706



Revised September 2022

AMVETS National Ladies Auxiliary

SCHOLARSHIP APPLICATION

(TYPE OR PRINT – ALL ITEMS MUST BE COMPLETED)

NAME:			TELEPH	IONE:
LAST	FIRST	MIDD	LE	
ADDRESS:				
ADDRI	ESS	CITY	STATE	ZIP
BIRTHDATE:		MARITAL S	STATUS:	
LIST YOUR EDUCATIONAL HISTO	RY BEGINNING WITH HIGH SC	CHOOL THROUGH	WHERE YOU ARE N	OW ENROLLED.
NAME OF SCHOOL	DATES ATTEN	NDED	DATE GRADUA	TED/CERTIFICATE GRANTED
LIST ALL COMMUNITIY ACTIVITIE (USE ANOTHER SHEET IF NEEDE	S IN WHICH YOU HAVE PARTI D)	CIPATED IN, INCL	UDING OFFICES HEL	D AND AWARDS RECEIVED.
LIST TYPES OF EMPLOYMENT AN REASONS FOR PERIOD OF UNEM	ID PERIODS OF UNEMPLOYMI	ENT IN THE PAST SHEET IF NEEDED	SHOWING INCOME,	LENGTH OF EMPLOYMENT AND/OR
	JUDGIN	NG CRITERI	A	
APPLICANTS ANNUAL INC	COME: SO	URCE:		
OTHER SCHOLARSHIPS O	OR FINANCIAL ASSISTA	NCE AWARDE	D:	
COURSE COST/SESSION:		ESTIMAT	TED COST OF LIV	/ING EXPENSES:
OTHER HOUSEHOLD INCO	OME AND HOW DERIVE	D:		
NUMBER OF DEPENDENT	S(LIST FIRST NAME AN	D AGE OF EAC	CH DEPENDENT)	

PARENT/GUARDIAN OR SPOUSE INFORMATION

ADDRESS: ADDRESS	CITY	STATE	ZIP
OCCUPATION:	ANNUAL	INCOME:	
MOTHER OR SPOUSE'S NAME:			
ADDRESS:			
ADDRESS	CITY	STATE	ZIP
OCCUPATION:	ANNUAL	INCOME:	
PARENTAL/SPOUSE CONTRIBUTION TOWARD COLL EXPENSES:	.EGE	APPLICANT'S ANI	NUAL INCOME:
UITION COST FOR YEAR OR SEMESTER: YEAR:		SEMESTER:	
NUMBER OF BROTHERS, SISTERS, OR CHILDREN A	ND AGES O	F SAME:	
NAME OF AMVETS LADIES AUXILIARY MEMBER:		NUMBER I	N COLLEGE:
ELIGIBILITY (Relationship to applicant):	AUX	ILIARY NUMBER AND	STATE:

<u>CERTIFICATION – I/WE CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS TRUE, COMPLETE, AND ACCURATE TO THE BEST OF OUR/MY KNOWLEDGE. I/WE AGREE TO PROVIDE, IF REQUESTED, ANY OTHER DOCUMENTATION NECESSARY TO VERIFY INFORMATION REPORTED. ANY FALSE INFORMATION WILL BE CAUSE FOR DENIAL, REDUCTION, OR WITHDRAWAL OF THE SCHOLARSHIP OFFERED.</u>

APPLICANT'S SIGNATURE: DATE:

**IF ALL REQUIREMENTS ARE NOT MET, THIS APPLICATION SHALL NOT BE CONSIDERED

DEADLINE DATE: JULY 1 – SEND ALL APPLICATION FORMS TO:

AMVETS NATIONAL LADIES AUXILIARY HEADQUARTERS ATTENTION: NATIONAL SCHOLARSHIP OFFICER 4647 FORBES BOULEVARD LANHAM, MD 20706-4380

PLEASE READ AND SIGN PRIVACY ACT ON REVERSE SIDE.

USE THIS SPACE TO COMPLETE QUESTIONS ON PREVIOUS PAGES, OR FOR COMMENTS NECESSARY FOR SPECIAL CONSIDERATIONS:

PRIVACY ACT ADDENDUM - SCHOLARSHIP APPLICATION

APPLICANT SHOULD REVIEW INFORMATION REQUESTED. NONE OF THE INFORMATION IS REQUIRED BY LAW AND IS, THEREFORE, DISCLOSED VOLUNTARILY. IT WILL BE USED IN CONSIDERING THE APPLICANT FOR THE SCHOLARSHIP, PUBLICITY, AND RELATED PURPOSES. NOT PROVIDING ALL OR PART OF THE REQUESTED INFORMATION SHALL RESULT IN AN APPLICANT NOT BEING CONSIDERED FOR THIS AWARD.

AUTHORIZATION TO RELEASE INFORMATION

I AUTHORIZE AMVETS NATIONAL LADIES AUXILIARY TO USE MY NAME AND STATE FOR PROMOTION AND PUBLICITY PURPOSES. WINNERS WILL BE REQUIRED TO PROVIDE THEIR SOCIAL SECURITY NUMBERS.

SIGNATURE:	DATE:
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ALL APPLICATIONS MUST BE POSTMARKED NO LATER THAN JULY 1.

NOTE: ALL DECISIONS OF THE AMVETS NATIONAL LADIES AUXILIARY SCHOLARSHIP JUDGING COMMITTEE ARE FINAL. THE DECISIONS WILL BE MADE WITHOUT REFERENCES OR PREJUDICE TO RACE, COLOR, SEX, CREED, OR NATIONAL ORIGIN.



AMVETS National Ladies Auxiliary Scholarship Checklist Reminders

Resume attached to application
Three letters of recommendation included
All letters of recommendations signed (handwritten or PDF verified; no computer signatures)
Official Transcript included
Official Transcript received in a sealed envelope with signature of issuer written across the seal
Current Auxiliary Membership Card
Application Form Signed
Signed Privacy Act Form
Letter of acceptance on official school letterhead included
Application was entirely filled out, writing N/A when not applicable