

AMVETS LADIES AUXILIARY

Department of Michigan



Career

Scholarship Application

Roberta Robinson, Scholarship Officer
AMVETS Ladies Auxiliary Dept. of MI
P.O. Box 254
Roscommon, MI. 48653
Phone: 810-614-2627
Email: rrob0883@gmail.com

Applications due to Department Scholarship Chairperson
postmarked no later than May 24, 2024

DEPARTMENT OF AMVETS LADIES AUXILIARY CAREER SCHOLARSHIP APPLICATION

GUIDELINES:

The AMVETS Ladies Auxiliary Career Scholarship Grants have been established to recognize need and reward 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 its members. Career Scholarship grants will be judged and awarded at the AMVETS Department Convention, held during the month of June. At least one (1) Career Scholarship grant will be awarded with a minimum amount of \$500. Identical or lesser amount of Career Scholarship grants may be awarded when finances permit.

ELIGIBILITY:

- 1) **The applicant must be a member of AMVETS, AMVETS Ladies Auxiliary, Sons of AMVETS or a spouse, child or grandchild of a member of the AMVET Family.**
- 2) **Applicants must be a high school graduate or submit an official letter from a high school stating a graduation date by June 30 of the application year. A high school equivalency certificate is acceptable.**
- 3) **Applicants must have been accepted in, or attending, an accredited technical or business school, college or university pursuing a program that does not lead to a bachelor's degree. Applicants must have at least six months remaining in their selected program.**

GUIDELINES FOR APPLICATIONS:

- 1) **Applicant must complete the application provided in a legible manner. Type or print please.**
- 2) **Statements of financial need must be completed. If applicant is (or was) employed, he/she must submit a W-2 form.**
- 3) **List the financial aid provided by parent or guardian.**
- 4) **The following documents MUST be submitted by May 24, 2024, directly to the Department of Michigan AMVETS Ladies Auxiliary Scholarship Officer:**
 - a) **An official transcript (with raised seal or raised watermark) of applicant's most recent high school or college transcript available for this year with cumulative grade average and total accumulated credits or notarized high school equivalency certificate with scores.**
 - b) **A self generated computerized transcript is NOT an official transcript and will not be accepted.**
- 5) **Applicant must submit a letter of acceptance, or attendance, on official school letterhead from an accredited technical school, business school, college or university.**
- 6) **Proof of eligibility - copy of applicant or sponsor's membership card.**
- 7) **All applications must be sent to the Department of Michigan AMVETS Ladies Auxiliary Scholarship Officer postmarked no later than May 24, 2024.**

JUDGING CRITERIA

- 1) **40% - Financial need: Information on application regarding financial need.**
- 2) **30% - Academic: Scholastic transcripts of semester average with all courses taken in previous years with explanation of grading system.**
- 3) **20% -Goals: Information from the personal data.**
- 4) **5% - Volunteerism**
- 5) **5% - Grammar & Punctuation**

All applications will be judged by the Scholarship Committee consisting of active AMVETS Ladies Auxiliary members. Winners will be announced at the AMVETS Ladies Auxiliary Department Convention in June. Checks will be mailed to the recipient(s) within 3 days of the close of convention.

AMVETS LADIES AUXILIARY CAREER SCHOLARSHIP APPLICATION

PLEASE TYPE OR PRINT LEGIBLY

APPLICANT INFORMATION

Name in full _____
 Present Address _____
 City _____ State _____ Zip Code _____ Telephone _____
 Cell Phone _____ E-mail _____
 Home Address _____
 City _____ State _____ Zip Code _____
 Name of School/Program _____

PERSONAL DATA

Date of Birth _____ Place of Birth _____
 Marital Status: Single _____ Married _____ Widowed _____ Divorced _____ Separated _____

Are your parents living? Father _____ Mother _____
 Do you have children? Yes _____ No _____ If yes, list ages _____
 Do you have any other dependents? Yes _____ No _____ If yes, specify _____
 What is your relationship to the AMVET family? _____

(Member, Spouse, Child, Grandchild)

What is your Sponsor's affiliation to the AMVET family? _____
 (AMVET, Ladies Auxiliary, SONS)

Eligibility: _____
 (Members name) (Post Number)

(Make copy of the AMVET Family Membership card and attach to application)

STATEMENT OF FINANCIAL NEED: I certify financial assistance is necessary for me to complete my educational program in my chosen field.

SIGNATURE: _____

If living in parent's home, _____
 Signature of parent or guardian

AGREEMENT:

If I am awarded a Career Scholarship Grant by the AMVETS Ladies Auxiliary, Department of Michigan, I will complete at least three months of my studies within the next 12 months, or I will refund the grant to the AMVETS Ladies Auxiliary, Department of Michigan. I understand this application and all credentials submitted by me, or others on my behalf, will remain the property of the Michigan AMVETS Ladies Auxiliary Scholarship Committee.

DATE _____

Signature

AMVETS LADIES AUXILIARY CAREER SCHOLARSHIP APPLICATION

Please type or print legibly

**Applicant's proposed budget for period of Career Scholarship grant:
Summarize any financial obligations you and/or your family have which may affect
the potential contribution to your education.**

Do you have siblings personally living with you? _____ If yes, What are their ages? _____
How many are: in high school? ___ College? ___ Self Supporting? ___ Partially Self Supporting? ___

FINANCIAL DATA

Source of Revenue:

Your earnings for the previous year _____ (enclose W-2 Forms)

Who contributes the major portion of your support? _____
Relationship _____

How much financial aid do you expect to receive?

Parents or family members: \$ _____

Pell Grants \$ _____

Michigan Competitive Scholarships \$ _____

Other \$ _____ Explain _____

Have you applied for other scholarships? Yes ___ No ___

If yes, describe source, amount and period of duration _____

**Have you been notified by any scholarship source that you will receive a scholarship for
next year? Yes ___ No ___**

If yes, give source and amount _____

List any scholarships, prizes, awards (with amounts) you have received.

AMVETS LADIES AUXILIARY CAREER SCHOLARSHIP APPLICATION

PERSONAL DATA

In a minimum of 200 and a maximum of 700 words, write about your interest in your chosen field and your goals. Include any volunteer work that you do to give back to your community. (Additional pages may be used) Grammar and punctuation will be judged on your Personal Data.