



Dale Ream Memorial Post #120

Mesick, Michigan

Scholarship Application

Scholarship Chairman

Judy Bulock

976 W. 18 ½ Rd.

Mesick, MI 49668

Home: (231) 885-1285

Cell: (231) 878-4605

AMVETS SCHOLARSHIP AWARDS

This General Education Scholarship will be awarded based on financial need and merit. The application consists of seven pages, including the cover page.

1. Two \$500.00 AMVETS, two \$500.00 Sons of AMVETS, and two \$500.00 Auxiliary (Jean Linna Memorial) scholarships (six total) will be awarded one each to six graduating seniors from Mesick High School. One \$500.00 AMVETS scholarship will be awarded to a graduating senior from Buckley High School. The AMVETS reserve the right to alter the award numbers depending upon amount of applications received.
2. Applications MUST be postmarked no later than May 1st. All applications are to be given to the Scholarship Chairperson listed on the cover of this application.
3. All applications will be judged by the Scholarship Committee. This Committee consists of active AMVETS, Sons, and Auxiliary members.
4. Consideration will be determined by a variety of factors, including relationship to the AMVETS family, financial need, merit, and sincere ambition.
5. Winners will be announced at the Senior Awards Banquets.

AMVETS SCHOLARSHIP AWARDS

1. Applicants must be enrolled at an accredited school, university, community college, or junior college to be eligible to apply.
2. Applicants must complete the application in it's entirety.
3. Statement of financial needs must be completed.
4. Applications must include a recommendation by their school.
5. Students must be a senior graduate seeking a higher education.
6. Scholarships will be granted with proof of successful completion of one semester and enrollment in the second semester of secondary education classes. Successful completion will consist of a passing grade and proof of continuance of education.
7. Applicants must turn in an official transcript from the institution and a schedule of the following semester's schedule to the Scholarship Chairperson no later than February 1 of the following year. In order to receive their monetary award. Awards will be given directly to the student, unless a request is received to make it out to the school.

APPLICATION FOR GENERAL EDUCATION SCHOLARSHIP

AMVETS, Sons of AMVETS, and Ladies Auxiliary Jean Linna Memorial scholarships

Dale Ream Memorial Post #120 - Mesick, Michigan

Full name: _____

Address: _____

Phone number: _____

Name of accredited school, university, or college you plan to attend:

Name _____

City, State _____

Personal Data

Date and place of birth: _____

Mother: _____

Father: _____

Employer: _____

Employer: _____

Are your parents married: YES NO

Are your parents veterans? YES NO

Do you have any relatives that are members of the AMVETS: YES NO

Circle one: AMVETS Sons of AMVETS AMVETS Ladies Auxiliary

Relative's name: _____

Are you employed: YES NO

Employer name: _____

Have you applied for any other scholarships: YES NO

Please list: _____

APPLICATION CONTINUED

Have you been awarded any other scholarships for your first semester: Yes No

Please name source and amount of any scholarships, prizes, or awards you have recieved:

What is you GPA? _____

If you completed any higher education aptitude testing, please list scores below:

ACT _____ SAT _____ CAT _____ MEAP _____

Stanford _____ Other (list) _____

Please use the area below to provide any additional information

STATEMENT OF FINANCIAL NEEDS

This should be signed by the applicant's parent or guardian.

I certify that financial assistance is necessary for this applicant to complete his or her education in his or her selected field.

Signature of Parent or Guardian: _____

AGREEMENT:

If I am awarded a scholarship by the AMVETS, Sons of AMVETS, or AMVETS Ladies Auxiliary it is my intention to complete my education as outlined and to serve as a member of the profession for which I am preparing myself. I understand that this application and all credentials submitted by me and others on my behalf will remain the property of the AMVETS organization's scholarship committee.

Date: _____

Applicant's signature: _____

APPLICANT'S PROPOSED BUDGET FOR THE SCHOLARSHIP PERIOD:

Estimated Expenses:	Estimated Income
Tuition and fees: _____	Personal savings: _____
Books & Equipment: _____	Vacation earnings: _____
Food: _____	Academic Year earnings: _____
Lodging: _____	Aid from parents / others: _____
Clothing: _____	Loans: _____
Other costs: _____	Other resources: _____
(specify) _____	(specify) _____
_____	_____
_____	_____
Total: _____	Total: _____

SOURCE OF REVENUE

Who contributes the major portion of your support?

1. Name: _____

Relationship: _____

Occupation: _____

Personal Data

Write briefly about your interests in your chosen field and your future plans.

What are your goals? How will they benefit others?

Statement by Counselor, Teacher, or Student Advisor

Please give as much specific information as possible concerning
the applicant's personal characteristics and ability.