



**AMERICAN LEGION AUXILIARY  
DEPARTMENT OF MICHIGAN  
2019-2020 NON-TRADITIONAL STUDENT  
SCHOLARSHIP**

FURTHER INFORMATION MAY BE OBTAINED BY:

Phone: (517) 267-8809; ext 119, FAX (517) 371-3698; email: [info@michalaux.org](mailto:info@michalaux.org)

Applications available on Website at: [www.michalaux.org](http://www.michalaux.org)

Deadline: Received by February 15, 2020

This scholarship was given by Allen Park Auxiliary Unit 409 as a memorial to Aletha (Lee) Harvey (deceased) Unit Education Chairman from 1977 to 1998 and other deceased members of Unit 409. One two year scholarship will be awarded in the amount of \$500.00 per year.

### **Eligibility**

1. Applicant must be a descendent of a veteran.
2. Applicant must be one of the following;
  - a. A non-traditional student returning to the classroom after some period of time in which his/her education was interrupted. A student will only be considered returning for one time for consideration of this scholarship.
  - b. A student over the age of twenty-two attending college for the first time pursuing a degree, or
  - c. A student over the age of twenty-two attending a vocational or trade school

### **RULES**

3. Scholarship must be used within six months of the winner being notified.
4. The money is to be applied toward expense of tuition and books necessary to pursue study at any school, college or other education institution in the State of Michigan.
5. No Unit shall enter more than one candidate in the Department competition.
6. Judging will be based on the following:

Need	25%	Scholastic Standing	25%
Initiative/ Goal	25%	Character/Leadership	25%

INCOMPLETE APPLICATIONS WILL BE **AUTOMATICALLY** ELIMINATED  
The selections of the judging committee shall be final.



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**A Complete Application Packet consist of the four following items:**

1. Attach a photocopy of the veteran's certificate of discharge from active duty (Form DD-214)  
If she/he has not filed the DD-214 with the local clerk, a copy may be obtained by going to [www.archives.gov](http://www.archives.gov) and requesting the military service records. If the DD-214 is unavailable a Form SF-180, Request Pertaining to Military Records is available at the same website.
2. Copy of High School Transcripts or College Transcript, if applicant has attended college.
3. Copy of the FAFSA Summary Report and Confirmation Page, or the FAFSA Student Aid Report (SAR). If FAFSA is unavailable a copy of Parents 2018/2017 Federal Income Tax Return will be accepted.
4. A signed and completed Application.

Mail or deliver this complete application packet to local American Legion Auxiliary Unit prior to February 15, 2020. If you need assistance in locating a local Unit please phone or email Department of Michigan at (517) 267-8809; email: [info@michalaux.org](mailto:info@michalaux.org)



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**APPLICATION**

APPLICANT INFORMATION

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email \_\_\_\_\_

Relationship to the veteran to which you are a descendant \_\_\_\_\_

Are you a member of the American Legion Family? \_\_\_\_\_

SCHOLASTIC INFORMATION

Date applicant graduated from High School \_\_\_\_\_

Has applicant attended college? Date and name \_\_\_\_\_

Submit work history if it has been more than five years since applicant attended school.



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FINANCIAL INFORMATION

Applicant's adjusted gross income \_\_\_\_\_

Applicant's Household adjusted gross income \_\_\_\_\_

Total # of household members (self, spouse, dependents) \_\_\_\_\_

INITIATIVE/GOALS and Community Service

On a separate sheet of paper, please tell us:

- Why you are attending college at this time
- If you have previously attended, why was your education interrupted.
- Why you feel you should be selected for this scholarship
- Describe any community service in which you have participated in.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**This Portion To BE Completed By the Sponsoring Unit**

The winning entry at each Unit shall be certified by the American Legion Auxiliary President or Education Chairman and mail to the Department Executive Director to be received on or before **March 1, 2020** Send to:

American Legion Auxiliary, Department of Michigan  
Atten: Executive Director  
212 N Verlinden Ave Suite B  
Lansing MI 48915

Unit Name and Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ STATE \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Signature of Unit President                      or                      Signature of Education Chairperson