

FURTHER INFORMATION MAY BE OBTAINED BY:

Phone: (517) 267-8809 Ext. 21, Fax (517) 371-3698

email: info@michalaaux.org

Applications available on the Website at: www.michalaux.org
Deadline: Must be received by Sponsoring Unit by March 10, 2024
Must be received by Department Office by March 15, 2024

ELIGIBILITY:

1. Applicant must be a descendent of a veteran.

REQUIREMENTS:

Applicant must meet one of the following:

- A non-traditional student returning to the classroom after some period of time in which her/his education was interrupted. A student will only be considered if this is the first time "returning" after an interruption.
- A student over the age of twenty-two attending college for the first time pursuing a degree, or
- A student over the age of twenty-two attending a vocational or trade school.

DESCRIPTION OF GRANT: 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 2-year scholarship will be awarded in the amount of \$500.00 per year.

RULES: Scholarship must be used within six months of the recipient notification. The grant is to be applied toward the expenses of tuition and/or books necessary to pursue study at any school, college or other educational institution in the State of Michigan. No Unit shall enter more than one candidate in the Department competition.

Judging will be based on the following:

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

INCOMPLETE APPLICATIONS WILL BE <u>AUTOMATICALLY</u> ELIMINATED The selection of the judging committee shall be final.



A Complete Application Packet consist of the following four items:

- 1. A copy of the veteran's discharge papers showing date of induction or enlistment and date of separation. (May be obtained from the County Clerk's Office where veteran resides.) If you do not have a copy of the veteran's discharge papers you have the following alternatives:
 - a) If the veteran lived in Michigan and received a Michigan bonus, you may apply to the Michigan Veterans Trust Fund, P.O. Box 30026, Lansing, MI 48909.
 - b) If she/he has not filed the DD-214 with the local clerk, a copy may be obtained by going to 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 on the same website.

Please note: unless he/she is deceased, only the veteran may request a copy of the document.

It will take 6-8 weeks to obtain copies of these documents. SO ACT PROMPTLY.

- 2. Transcript of grades (high school transcript if in high school, college transcript if in 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 Parent's and applicant's 2023 or 2024 Federal Income Tax Return will be accepted. It is permissible to redact Social Security numbers.
- 4. Completed and signed Non-Traditional Student Application.

MAIL/EMAIL COMPLETED SCHOLARSHIP APPLICATION PACKET TO:

Your local American Legion Auxiliary Unit prior to March 11, 2024.

If you need assistance with determining your local Unit, please contact:

American Legion Auxiliary Department of Michigan ATTN: Non-Traditional Scholarship Committee 212 N Verlinden Ave, Suite B
Lansing, MI 48915
info@michalaux.org

INCOMPLETE APPLICATIONS WILL BE <u>AUTOMATICALLY</u> ELIMINATED The selection of the judging committee shall be final.



APPLICATION

APPLICANT INFORMATION		
NAME		
HOME ADDRESS	CITY	ZIP CODE
HOME NUMBER (include area code) _		BIRTHDATE
EMAIL_		
APPLICANT'S RELATIONSHIP TO V	ETERAN:	
Are you a member of the American Legi-	on Family? Yes Please circ	No le one
Date graduated from High School		
Have you attended college? Yes Please circle o	No Date	
Name of Institution attended		
Please submit work history if it has been	more than five years s	ince you attended school.
INCOME INFORMATION:		
Mother's Name	Father's Name	
Place of Employment	Place of Empl	oyment
W2/1099 Income	W2/1099 In	acome
OTHER INCOME:		
Alimony	Alimony	



Child Support	Child Support	
Social Security Benefits	Social Security Benefits	
Pension/Retirement	Pension/Retirement	
Other Income	Other Income	
Total Household Gross Income		
Number of DEPENDENT CHILDREN	N AT HOME (including yourself)?	
How many are in high school?	How many are in college?	
INITIATIVE/GOALS AND COMMU	NITY SERVICE	
Why should we select you for t	d, why was your education interrupted?	
This portion to b	pe completed by the sponsoring unit	
the Education Chairman. Then mailed American Le	e certified by the American Legion Auxiliary President to: egion Auxiliary, Department of Michigan Attn: Executive Director 212 N Verlinden Ave Suite B Lansing, MI 48915 info@michalaux.org	t or
Unit Name and Number		
Address		
City	STATEZip Code	
Signature of Unit President	or or Signature of Education Chairperson	