

AMVETS POST 1776

549 Merchant Street
Vacaville, CA 95688
707-447-6354

SCHOLARSHIP APPLICATION FOR 2019

Name: _____
(Last) (First) (Middle)

Address: _____ CA _____
(St # name) (City) (Zip code)

Date of birth: _____ Place of birth _____ Sex _____

High School(s) attended (dates of attendance and expected graduation) _____

College or university you expect to attend: _____

School activities: (attach a separate sheet if necessary): _____

Community activities: _____

Honors or awards received in High school: _____

Employment within the last three years: _____

Name of parents or legal guardian: _____

Address: _____

I certified that the above information is correct: _____
(Students' signature)

PARENTS/GUARDIAN CONFIDENTIAL STATEMENT

Student's name: _____
(Last) (First) (Middle)

Check those that apply:

- | | |
|--|--|
| <input type="checkbox"/> Father is deceased | <input type="checkbox"/> Parents are separated or divorced |
| <input type="checkbox"/> Mother is deceased | <input type="checkbox"/> Other special circumstances |
| <input type="checkbox"/> Parents are disabled and unable to work | (Explain on the reverse side) |

Father, stepfather or legal guardian:

Name _____ Address _____

Occupation _____ Employed by: _____

Years with employer: _____

Have you ever been in the armed forces? ☐ Yes ☐ No

If so, what branch of service: _____ Number of years: _____

Date of enlistment: _____ Date of discharge _____ Highest rank: _____

Discharge type: ☐ Honorable ☐ General ☐ undesirable
☐ Bad conduct ☐ Dishonorable

PLEASE ATTACH A COPY OF YOUR DD-214 (DISCHARGE DOCUMENT)

Mother, stepmother or legal guardian:

Name _____ Address _____

Occupation _____ Employed by: _____

Years with employer: _____

Have you ever been in the armed forces? ☐ Yes ☐ No

If so, what branch of service: _____ Number of years: _____

Date of enlistment: _____ Date of discharge _____ Highest rank: _____

Discharge type: ☐ Honorable ☐ General ☐ undesirable
☐ Bad conduct ☐ Dishonorable

PLEASE ATTACH A COPY OF YOUR DD-214 (DISCHARGE DOCUMENT)

PARENTS CONFIDENTIAL STATEMENT CONTINUED

What is the number of dependent children living in the household and what are their ages?

Are either parents members of a veteran's organization? Check those that apply

- | | |
|---|---|
| <input type="checkbox"/> American Legion | <input type="checkbox"/> Disabled American Veterans |
| <input type="checkbox"/> Veterans of Foreign Wars | <input type="checkbox"/> Brotherhood of Vietnam Veterans |
| <input type="checkbox"/> AMVETS | <input type="checkbox"/> United Veterans Memorial Association |
| <input type="checkbox"/> Any veterans Auxiliary | <input type="checkbox"/> Other veteran group (please specify) |
-

We declare that the above information on this form is true and correct to the best of your knowledge and belief.

(Signature of parent or legal guardian)

STUDENTS STATEMENT

In the space provided here or on a separate sheet of paper, please write a short autobiography and include a discussion of your interests, hobbies, special skills, church or social activities, and any other information you feel will help us choose you as a applicant for the scholarship. In addition, tell us your educational goals, career plans, and how you expect further education to prepare you for life's challenges. (***Please attach a copy of your high school transcript***)

DESCRIPTION OF SCHOLARSHIP

AMVETS POST 1776 Vacaville, CA

There shall be three scholarships awarded for \$250 to Vanden High, Vacaville High, Will C Wood, Buckingham Charter and Vacaville Christian High. Applicants shall be graduating seniors. The applicant must be of high moral character, possess a 3.0 GPA or better and demonstrate a need for monetary assistance in attending any accredited college or specialized school. **First preference is given to dependents of veterans. Incomplete applications or applications received after the date below will not be considered. All applications must be received by Monday 15 April 2019.**

PLEASE MAIL COMPLETED APPLICATIONS TO:

AMVETS POST 1776
c/o Lewis Derfuss
549 Merchant Street
Vacaville, CA 95688

OR

Call 707 592-9040 if you have any questions

Completed applications in a sealed and addressed envelope may also be hand delivered and dropped in Vet's Hall delivery mail box (**Not the "Flag Drop" Mail Box**) by the front door at 549 Merchant Street.