



American Legion Auxiliary, Department of Rhode Island

APPLICATION FOR Book Award

RECOMMENDATIONS: THREE (3) ARE REQUIRED. One from school, one from community group leader and one from one other person **NOT RELATED** to the applicant.

1. SCHOOL: A comprehensive letter covering character, personal scholarship standing of the applicant from an authority in high school, and a transcript of high school records.
2. COMMUNITY GROUP LEADER: Any youth group to which the applicant has belonged. For example: CYO, YWCA/YMCA, Girls/Boys Club, or Girl Scouts, Boy Scouts, etc.
3. OTHERS: A responsible person who can give a worthwhile opinion of the character, industry and general worthiness of the applicant.

THESE LETTERS MUST BE ATTACHED TO THIS APPLICATION

PARENTS STATUS (THIS SECTION TO BE COMPLETED BY PARENT OR LEGAL GUARDIAN)

FATHER'S NAME: _____

OCCUPATION: _____

ANNUAL INCOME: \$ _____ SOCIAL SECURITY/RETIREMENT INCOME \$ _____

MOTHER'S NAME _____

OCCUPATION: _____

ANNUAL INCOME: \$ _____ SOCIAL SECURITY/RETIREMENT INCOME \$ _____

PARENT'S ADDRESS: _____

IF PARENT IS DECEASED, IS A TRUST FUND ESTABLISHED FOR EDUCATION? _____

DO YOU OWN YOUR OWN HOME? _____ MORTGAGE \$ _____ RENT: _____

TODAY'S VALUE OF HOME: \$ _____

NUMBER OF CHILDREN IN FAMILY (single) _____ (married) _____

NUMBER OF CHILDREN LIVING AT HOME: _____

NUMBER OF CHILDREN IN SCHOOL: _____ Grade school: _____ High School: _____ College: _____ Other: _____

THE ABOVE STATEMENTS ARE CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF PARENT OR LEGAL GUARDIAN:

DATE: _____

AMERICAN LEGION AUXILIARY
DEPARTMENT OF RHODE ISLAND

APPLICATION FOR Book Award

NAME IN FULL
(Please print clearly) _____

ADDRESS: _____

HIGH SCHOOL NOW ATTENDING: _____

AVERAGE AT END OF JUNIOR YEAR: _____ CLASS RANK: _____

NAME OF COLLEGES TO WHICH YOU HAVE APPLIED IN ORDER OF CHOICE:

1. _____ Accepted: Yes _____ No _____ Unknown _____

2. _____ Accepted: Yes _____ No _____ Unknown _____

3. _____ Accepted: Yes _____ No _____ Unknown _____

WHICH SCHOOL DO YOU PLAN TO ATTEND? _____

WHAT COURSE DO YOU PLAN TO PURSUE? _____

HAVE YOU APPLIED FOR OTHER SCHOLARSHIPS? _____ Yes _____ No _____

IF YES, WHERE? _____

HAVE YOU RECEIVED ANY? Yes _____ No _____ IF SO, HOW MUCH? \$ _____

DO YOU PARTICIPATE IN ANY EXTRA-CURRICULAR SCHOOL ACTIVITIES? IF SO, PLEASE LIST:

EMPLOYMENT:

Employer Position held Approx. earnings Length of employment 1.

2.

3.

Will this money you earned be used for your education? How much?

Signature of Applicant:

*****VERY IMPORTANT*****

**A PHOTOSTAT COPY OF YOUR FATHER, MOTHER OR GRANDPARENT'S DISCHARGE PAPERS MUST
ACCOMPANY THIS APPLICATION**
