



**Sons of the American Legion  
Springfield Squadron Post 143  
2019 Scholarship Application**

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**CONTACT INFORMATION**

APPLICANT'S NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: (        ) \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_  
(MONTH/DAY/YEAR)

EMAIL: \_\_\_\_\_

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**HIGH SCHOOL RECORD**

NAME OF HIGH SCHOOL: \_\_\_\_\_

List any (1) activities you participated in, (2) awards, honors, and recognition you received, and (3) school or community organizations you held membership in during high school.

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If applicable, list and describe any job or work experience.

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Describe any community service/volunteer work you participated in during your high school career.

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## **FUTURE PLANS**

What post-secondary institution do you plan on attending?

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What major or field of study do you plan on pursuing? Why?

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Describe what you see yourself doing ten years from today, in regards to your career, education, and/or community.

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## **ADDITIONAL**

What do you feel is your greatest contribution to your community?

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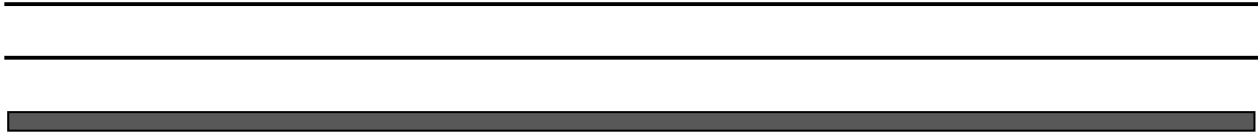
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Are you a member of the *Sons of The American Legion* or the *American Legion Junior Auxiliary*? If yes, which American Legion Post are you affiliated with?

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The application must be postmarked on or before April 2019 and mailed

One \$1,000.00 scholarship will be awarded upon reviewing the application

Each high school and the recipient will be notified by May 1, 2019.