

# Arizona VFW Auxiliary Merit Scholarship

The Veterans of Foreign Wars of the United States Auxiliary will be accepting applications from **HIGH SCHOOL SENIORS** to compete for Scholarship Awards.

The completed Application and following Requirements are needed to qualify for this scholarship:

#### ELIGIBILITY:

- A graduating high school senior, Class of 2020.
- A resident of the State of Arizona
- The son, daughter, sister, brother, grandson, granddaughter of a member of the VFW or the VFW Auxiliary. (The VFW or Auxiliary member must be a member in good standing and can be a member within or outside of Arizona.)
  (NOTE: Judging will be on a point system and additional points will be given if applicant is an Arizona Auxiliary member.)

#### **REQUIREMENTS:**

- Transcripts of Grades 9, 10, 11 and current
- Documentation to support extra curricular activities such as clubs, sports, band or other school related organizations (letters, awards, etc.)
- o Description of any church activities
- Description of any community activities
- Description of employment
- Copy of Entry Application to college or vocational school
- Letters of recommendation from teachers, principal, etc.
- Bibliography \*

For judging purposes the application should be accompanied by Letters of Recommendation, newspaper clippings, pictures and any other data pertinent to the above.

\*The Bibliography must include:

- Tell the judges about yourself
- What are your goals and aspirations in life?
- Why should you receive a scholarship?
- What relationship are you to a member of the VFW or the Auxiliary to the VFW? How has that relationship had a positive affect on your life?

### The application and all above documentation should be in a binder with documents enclosed in sheet protectors and received by Department Scholarship Chairman on or before April 1.

For more information contact:



## Arizona VFW Auxiliary Merit Scholarship APPLICATION

THIS APPLICATION SHOULD BE THE 1<sup>ST</sup> PAGE IN YOUR BINDER

Applicant Information	Date	, 20	)20
Applicant Name			
Address	City	Zip	
Telephone No. ()	Social Security No		
Parents or Guardian Names			
High School			
Address	City	Zip	
<b>Sponsor Information</b> (VFW or Aux <b>OR Member Information</b> , if Applic	•	1.	applying)
Member Name Member of Post / Auxiliary No	Located in		
Please attach a copy of current mem	bership card.		
Your Relationship to Member: SonDaughter Brother Sister			
Applicant Signature (Required)			
Parent / Guardian Signature			
Sponsored by VFW Auxiliary to Pos	t		
Auxiliary President Signature			
Auxiliary Scholarship Chrm. Signatu	re		
Completed Application & Bind	der must be received bv	Department Chaii	rman

Completed <u>Application & Binder</u> must be received by Department Chairman no later than April 1, 2020.

> Department Scholarship Chairman Brenda Kinghorn P.O. Box 1108 Pinetop, AZ 85935 Phone: 928-205-1066 Email: <u>breadfriend@msn.com</u>

Winners will be notified by Department Chairman Brenda Kinghorn