



AMERICAN LEGION AUXILIARY

Department of California

Lucille Ganey Memorial Scholarship



FORM E21G

This form intended for
Students attending Stephens College

When an application is submitted by a student for more than one scholarship offered by the Department or National, the student is eligible to receive only one. A student may not receive more than one scholarship from Department in any one year.

Name of Applicant _____ You live: At Home _____ On your own _____

Address _____ How long have you lived in CA? _____

City, State, Zip _____ Telephone _____

Social Security # _____ Grade in school at time of application _____

What course or vocation do you wish to pursue? _____

Applicant must attend or be attending STEPHENS COLLEGE in Columbus, Missouri

Exact date you plan to enter school next semester _____

Father/Guardian Name _____ Mother/Guardian Name _____

Address _____ Occupation _____

Business Address _____

Information about brothers and sisters, if any. (Name, address, marital status, occupation) _____

Approximate NET (after tax) monthly income of family \$ _____

Source of income _____

Are you receiving aid from: Veterans' Welfare Board? Yes__ No__

Government Insurance Compensation? Yes__ No__

• (Servicemen's Readjustment Allotment?) Yes__ No__

• State Educational Aid? Yes__ No__

• What is the total aid received \$ _____

Does your family own a home Yes__ No__

Are your parents able to aid you in any way at this time Yes__ No__

If yes, to what extent? _____

If not, why? _____



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APPLICANT'S ANTICIPATED ANNUAL REVENUE:	
Cash on Hand	\$
Net earnings during the semester	\$
Working for board	\$
Working for room	\$
Assistance from parents/guardians	\$
Assistance from university/college	\$
Loan, gift or scholarship (not including American Legion Auxiliary)	\$
Advance from other source	\$
APPLICANT'S ANTICIPATED SCHOOL YEAR EXPENSES:	
Tuition and fees	\$
Board	\$
Room	\$
Books	\$
Organizations	\$
Incidentals (itemize and explain)	\$

Have you applied for any other American Legion Auxiliary (ALA) or ALA National scholarship? YES ___ No ___
If yes, which one (if more than one, list all) _____

Applicant's applying for scholarships shall submit with this application:

1. Three (3) letters of reference attesting to character. Letters may be from school officials, employers or personal friends. (Only one (1) letter may be from a personal friend.)
2. Current school transcript of applicant's grades
3. Letter from applicant expressing need.

Applicant must locate the closest American Legion Auxiliary Unit to mail application and supporting materials
Applications will not be accepted before September 1st or after March 16th

Signature of Applicant _____ Date _____
 Sponsored by Unit (Name & Number) _____ Date of Receipt of Application _____
 Signature of Unit Education Chairman _____ Date _____
 Chairman's Name _____ Phone: _____
 Address _____
 Signature of Unit President _____ Date _____
 Signature of District Chairman _____ Dist # _____ Date _____
 Signature of Department Chairman _____ Date _____

In accordance with the Privacy Act of 1974, this information will be held in strict confidence