



American Legion Auxiliary Department of Virginia

Past Presidents Parley

Medical Scholarship Application Requirements 2020-2021

The American Legion Auxiliary, Department of Virginia, offers a scholarship in the amount of \$500 to the children and grandchildren of Veterans who desire financial assistance to attend an accredited education institution in pursuit of a medical, nursing or allied healthcare profession,

Rules

- Applicants must be daughters, sons, grandsons, or granddaughters of Veterans who are eligible for membership in the American Legion, but the Veteran is not required to be a member.
- Applicants must be in their senior year or graduates of an accredited high school but may not have previously attended an institute of higher learning.
- Previous scholarship recipients are not eligible for further competition.
- Participation in this scholarship program is voluntary in all units.
- No Unit may enter more than one candidate in the competition.
- Applications for scholarships must be secured from the Unit President in the community in which the applicant resides. If there is no participating ALA unit in the applicant's community, contact the Department President.

Application Packet Requirements

- Completed scholarship application form with all required documents provided.
- Three letters of recommendation from the following are required:
 - Principal or Counselor of the school from which the applicant is a graduate.
 - Two from citizens, other than relatives, certifying the applicant's character, Americanism, and Scholarship.
- An original essay consisting of not more than 500 words on a topic of the applicant's choice.
- A certified transcript from the high school in which the applicant is currently enrolled, or from which they are a graduate.

To Unit President: One completed, the application packet with the Unit President's approval should be submitted to the Department Past Presidents' Parley Chairman for judging by the PPP Committee, postmarked no later than April 15, 2021.

Note: Applications of all scholarship recipients under any program or committee will be reviewed and certified by the Department Finance Committee prior to any notifications or payments.



**American Legion Auxiliary Department of Virginia
Past Presidents' Parley Medical Scholarship Application 2020-2021**

Applicant's Name: _____

Current mailing address: _____

Date of Birth: _____ Phone # _____

Name of individual through whom you are eligible for the scholarship: _____

Brief summary of military service of individual through whom you are eligible: _____

Number of dependent children in the family (under 19 years of age) _____

Grade level(s): _____, _____, _____, _____, _____, _____, _____

Occupations: _____

Father/Stepfather: _____ Annual income \$ _____

Mother/Stepmother: _____ Annual income \$ _____

Government compensation/pension received by parent and/or child \$ _____

Compensation/pension (for applicant) if a parent has remarried or died: \$ _____

Are you eligible for or drawing Social Security benefits? Yes _____ No _____

If yes, amount: \$ _____ End date: _____

Are you eligible for benefits under the Jr. G.I. Bill? Yes _____ No _____

If yes, amount: \$ _____ End date: _____

Name of High School and date of graduation: _____

Please identify the healthcare career you wish to pursue: _____

Name and address of accredited institution of higher learning at which you wish to pursue your healthcare career: _____

Signature of Applicant: _____ Date: _____

Printed name of Unit President _____ Unit number _____

Signature of Unit President _____ Date _____

This *completed* applications including all required documents must be submitted to the Unit President for review by April 1, 2021. The Unit President must then submit the completed application to the Past Presidents Parley Chair, Dr. Lisa Chaplin, at 8612 Den Bark Drive, North Chesterfield, VA 23235 postmarked no later than April 15, 2021.