



## AMERICAN LEGION AUXILIARY

### GENERAL BUCKNER UNIT 16

### DARLENE SHELDON MEMORIAL SCHOLARSHIP

**AWARD:** There will be one scholarship award yearly in the amount of \$1000.00 dollars. The Scholarship must be used within (12) months from the date the winner receives notification. The award will be paid directly to the Institute of Higher Learning upon receipt of proof of enrollment.

**ELIGIBILITY:**

1. Candidates for this award shall be graduating Seniors in High School/Flex School/Connections or Private School with a GPA no higher than 3.5, who have applied for or have been accepted in a college or vocational technical Institution.
2. Applicants must:
  - a. Be a Citizen of United States and a resident of Alaska.
  - b. Be a graduate of a school located on the lower Kenai Peninsula, Anchor Point South, Including the communities of Nikolaevsk, East End Rd and across Kachemak Bay.
  - c. Candidate does NOT need to be a member of the American Legion Organization.

**SELECTION CRITERIA:**

This is a competitive application process. Selection will be made without regard for race, color, national origin or sex of candidate. Application will be judged on:

- a. Completion of Packet
- b. Personal Essay – 500 words. Include your likes/dislikes. What are your goals; Why do you want to go to college and why did you choose your profession? What is your involvement in school, family and community? Why should we award you this scholarship?
- c. Two letters of recommendation; ONE from teacher/counselor and ONE from community member who has an understanding of you personally.
- d. Certified copy of High School GPA

**DARLENE SHELSON MEMORIAL SCHOLARSHIP**

**APPLICATION:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

INSTITUTION YOU ARE PLANNING TO ATTEND \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLANNED COURSE OF STUDY \_\_\_\_\_

**ATTACHMENTS;**

1. PERSONAL ESSAY (MINIMUM 500 WORDS)
2. CERTIFIED COPY OF HIGH SCHOOL GPA
3. 2 LETTERS OF REFERENCE

**NOTE; The deadline is APRIL 10<sup>TH</sup>** Please have your completed application and all attachments submitted to the American Legion Auxiliary Scholarship Chairmen by that date. Please use a 8 ½ X 11" envelope. Drop off location (after 2pm) at American Legion Post #16; located at 2410 East End Rd (907)235-8864

Chairman: Paula Gallagher 907-299-0172 email; paulagal907@gmail.com