

**2020 THE AMERICAN LEGION, DEPARTMENT OF NEW JERSEY, SCHOLARSHIP**

TWO (2) \$4,000 EDUCATION SCHOLARSHIPS (\$1,000 year for four years)

FOUR (4) \$2,000 EDUCATION SCHOLARSHIPS (\$1,000 year for two years)

TWO (2) \$1,000 EDUCATION SCHOLARSHIPS (\$1,000 for one year)

ONE (1) \$1,500 JOHN CASEY SCHOLARSHIP (\$1,500 for one year)

1. NAME OF APPLICANT \_\_\_\_\_
  2. ADDRESS \_\_\_\_\_
  3. DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_
  4. NAME OF FOREBEARER BY WHICH APPLICANT IS ELIGIBLE \_\_\_\_\_
  5. RELATIONSHIP \_\_\_\_\_
  6. 2020 NEW JERSEY AMERICAN LEGION MEMBERSHIP CARD NO. \_\_\_\_\_
  7. IF DECEASED, CAUSE OF DEATH \_\_\_\_\_ DATE OF DEATH \_\_\_\_\_
  8. IS FOREBEARER A COMBAT WOUNDED VETERAN? YES \_\_\_\_\_ NO \_\_\_\_\_
  9. BRIEF STATEMENT OF MILITARY SERVICE AND DATES OF SERVICE: \_\_\_\_\_  
\_\_\_\_\_
  10. NUMBER OF DEPENDENT CHILDREN IN FAMILY (INCLUDING SELF) UNDER 18 YEARS \_\_\_\_\_  
OVER 18 YEARS \_\_\_\_\_ GRADE LEVEL \_\_\_\_\_
  11. OCCUPATION OF FATHER (STEPFATHER) \_\_\_\_\_ ANNUAL INCOME \$ \_\_\_\_\_
  12. OCCUPATION OF MOTHER (STEPMOTHER) \_\_\_\_\_ ANNUAL INCOME \$ \_\_\_\_\_
  13. GOVERNMENT COMPENSATION/PENSION RECEIVED BY PARENT AND/OR CHILDREN  
\$ \_\_\_\_\_  
COMPENSATION OR PENSION FOR APPLICANT IF MOTHER HAS REMARRIED OR IS  
DECEASED \$ \_\_\_\_\_
  14. ARE YOU ELIGIBLE FOR/OR DRAWING SOCIAL SECURITY BENEFITS? YES \_\_\_\_\_ NO \_\_\_\_\_
  15. IF SO, AMOUNT \$ \_\_\_\_\_ TIME LIMIT OF BENEFITS \_\_\_\_\_
  16. HIGH SCHOOL ATTENDING & DATE OF GRADUATION \_\_\_\_\_
  17. NAME AND LOCATION OF COLLEGE, UNIVERSITY OR SCHOOL OF HIGHER LEARNING YOU  
DESIRE TO ATTEND \_\_\_\_\_
  18. THE VOCATION YOU PLAN TO PURSUE \_\_\_\_\_
  19. ESTIMATED TOTAL ANNUAL EXPENSE FOR SCHOOL CHOSEN \$ \_\_\_\_\_
- AMERICAN LEGION POST NO. \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
SIGNATURE OF POST COMMANDER

\_\_\_\_\_  
COUNTY

\_\_\_\_\_  
DATE