



AMERICAN LEGION AUXILIARY
Department of California
Lucille Ganey Memorial Scholarship

FORM E21G

2008-2009
 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 _____ Address _____ Occupation _____ Business Address _____	Mother/Guardian Name _____ Address _____ Occupation _____ Business Address _____
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Information about brothers and sisters, if any. (Name address, martial status, occupation) _____

Appropriate NET (after tax) monthly income of family: \$ _____
 Source of income: _____

Are you aid receiving from: Veterans' Welfare Board - Yes No Government Insurance Compensation -Yes No
 S.R.A. (Servicemen's Readjustment Allotment)- Yes No State Educational Aid - Yes No
 How much? _____

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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RECEIPTS: ANNUAL

Cash on hand	\$ _____
Net earnings during the semester	\$ _____
Working for board	\$ _____
Working for room	\$ _____
Assistance from parents or guardian	\$ _____
Assistance from Stephens College	\$ _____
Loan, gift or scholarship (other than from this organization)	\$ _____
Advance from any other source	\$ _____

EXPENSES: SCHOOL YEAR

Tuition and fees	\$ _____
Board	\$ _____
Room	\$ _____
Books	\$ _____
Organizations	\$ _____
Incidentals (itemize and explain)	\$ _____

Applicants 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 support materials.**

(Applications will not be accepted before September 1, 2008 or after March 16, 2009.)

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.