

## Sons of The American Legion Detachment of Virginia 2024 Scholarship Application

In an effort to promote programs, which encourage its members to seek higher education, the Sons of The American Legion, Detachment Of Virginia is proud to continue its Annual College Scholarship Competition.

The winner of the scholarship will be announced at the Detachment's July 2024 Detachment Convention in Herndon. The individual will receive \$1,500, to be available for use during the 2024-25 school year (scholarship check is issued to the winner through the school's finance office).

Anyone interested in being considered for this scholarship must complete an application. The form is attached.

The rules of the scholarship program are as follows:

- Applicant must be an active member of a squadron within the Detachment of Virginia, Sons Of The American Legion.
- Applicant must be a high school senior who graduates with his class in the spring of 2024
- Winner must attend an accredited college, university, or trade school.
- This is a one-time award. Any recipient of this scholarship may not apply in subsequent years.
- Applicants will be judged largely on their involvement in the activities in the Sons Of The American Legion. Transcripts, SAT Scores, GPA, work experience, and special interest will also be considered.
- List all grants and/or scholarships received.
- In addition to the application, the applicant must submit:
  - 1. A written recommendation from the applicant's squadron commander, and additional recommendation accepted from the American Legion Post Commander in support of the Application.
  - 2. An essay written by the applicant (not to exceed 800 words) explaining the reasons they feel they should receive this scholarship.
  - 3. Completed application and attachments must be postmarked no later than **June3**, 2024 and sent to:

Clint Bolt, Chairman 540 788-1212(H)
Detachment Scholarship Committee 540 522-2545(C)
9598 Bristersburg Road
Catlett, VA 20119 SonsCDBolt@aol.com

## 2024 S.A.L. Scholarship Application

Name:						
Address:						
City:						
State:	Zip Code:					
Telephone Number:						
Squadron:	Member Since:					
SAL Membership ID. #:						
High School & Address:						
High School Telephone Number:						
College and Address:		_				
College Telephone Number:		_ _				
College Student ID #:		_				
Parents Name and Phone Number	•••					