## **CW4 BILL RUTH POST 10076**

**VETERANS OF FOREIGN WARS** 

P.O. BOX 13

MOUNTY AIRY, MD 21771



#### 2025

#### **SCHOLARSHIP PROGRAM APPLICATION**

POST COMMANDER: Matt Harris

YOUTH ACTIVITIES CHAIRMAN: Rob LeVan

## VETERANS OF FOREIGN WARS CW4 BILL RUTH POST 10076 MOUNT AIRY, MD 21771

#### **APPLICATION FOR SCHOLARSHIP GRANT**

### **Student Information**

Name:	Date of Birth:
Place of Birth:,	
Home Address:,,	
Service Dates:	Type of Discharge:
Schoo	l Information
High School, Trade School, or College curren	ntly attending:
Name:	Phone:
Address:,,	
higher learning to which you are/have apply been accepted.)	college, list in order of preference, the institutions of ving(ed). (Indicate with an asterisk where you have
2	
3	
Proposed Course of Study:	

# **Parent/Guardian Information**

Name:	Relationship:
Occupation:	
Phone:	
Name:	Relationship:
Occupation:	
Phone:	
Sp	onsor Information
Name of Sponsor:	Veteran: Auxiliary:
Relationship to Applicant:	Is Sponsor Deceased:
Branch of Service:	
	Type of Discharge:
Sponsor VFW Affiliation: Post/Auxiliary	No
IfActive,Reserve,Na	ational Guard and applying for personal scholarship, list a
If no VFW affiliation, provide a copy of record.	a DD-214 or Statement of Service from your personnel

## **Student Work Experience**

From	То	Employer	Position/Duties

### **School Activities**

Position

## **Community Activities**

Year	Activity	Position

## **References (not relatives)**

Name	Address	Phone Number

#### **Other Information**

The following information is to be submitted to the Scholarship Committee of the CW4 Bill Ruth VFW Post 10076 no later than May 1, 2025:

- 1. High School Academic Transcript, including class rank, SAT and/or other test score results, certified by school registrar, trade school transcripts, or college transcripts.
- 2. Letters of reference from each of the three references listed in this application.
- A brief original essay indicating your career objective and your desire of further education.

#### **Comments**

Please provide any additional information or special facts that you would like the Scholarship Committee to consider in connection with your application (i.e.- VFW Voice of Democracy Contest, VFW Buddy Poppy Contest, VFW Loyalty Day Contest, Boys State or Girls State, Boy Scouts or Girl Scouts, membership in the VFW or its Auxiliary, and extracurricular volunteer activities – youth/church/community). Continue on a separate page if necessary.

## Certification

complete. I fully understand that any misrepresentation or incorrect information can lead to disqualification and/or forfeiture of the scholarship grant.		
Student's Signature	Date	
NOTE: The following is for grad	uating high school students only.	
Reviewed By:		
School Counselor Signature	Date	
Parent Signature	Date	