

**THE AMERICAN LEGION, DEPARTMENT OF GEORGIA  
NINTH DISTRICT  
ROBERT E. "BOB" CAMPBELL MEMORIAL SCHOLARSHIP**

Scholarship Application (\$1000.00)

1. Name of Applicant: \_\_\_\_\_(First Middle Last)
2. Home Address: \_\_\_\_\_
3. City and State: \_\_\_\_\_, \_\_\_\_\_ Zip: \_\_\_\_\_
4. Date of Birth: \_\_\_\_\_ Telephone #: \_\_\_\_\_
5. Name of American Legion Member Sponsoring Applicant: \_\_\_\_\_
6. Relationship to Sponsoring Member: \_\_\_\_\_
7. Sponsoring Post Name and Number: \_\_\_\_\_
8. Applicant must attach an endorsement from the sponsoring Post.
9. School Applicant last attended (or is attending) \_\_\_\_\_
10. School Address: City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
11. Academic Excellence:
  - a. Accumulated Grade Point Average (GPA) \_\_\_\_\_
  - b. Class Ranking \_\_\_\_\_
  - c. Test Score (SAT) \_\_\_\_\_ ( Must attach official SAT record)
  - d. Must attach official School Transcript.
  - e. Must have 3.0 Average on a 4.0 Scale in Core Subjects in all Work taken in Grades 9-12.
12. A recommendation from High School Principal must be attached to Application.
13. Name of School where Applicant wishes to Enroll \_\_\_\_\_
14. Address of School to which check should be mailed if awarded (typically this is the business office.)

Street: \_\_\_\_\_

City: \_\_\_\_\_ ST. \_\_\_\_\_ Zip: \_\_\_\_\_

Attention: \_\_\_\_\_

15. Name of Parent or Guardian of Applicant: \_\_\_\_\_

16. Parent's/Guardian's Address : \_\_\_\_\_

City \_\_\_\_\_ ST. \_\_\_\_\_ Zip: \_\_\_\_\_

17. Are Parents or Grandparents Members of American Legion? \_\_\_\_\_

**(Answer the following questions # 18 through 21 on a separate sheet of paper in a short essay Answer Format of 300 words or less)**

18. What School and Community Activities do you participate in?

19. What do you see yourself doing in 10 years? Why?

20. What Major do you plan to pursue?

21. Who inspired you to seek a College Degree and why?

## **SCHOLARSHIP REQUIREMENTS**

- 1. All Applications must be completed on typewriter or word processor.**
- 2. Applicant must be a child or grandchild of a Veteran of military service who is or was a member of the American Legion in the Ninth District Department of Georgia.  
(Sponsoring Post is responsible for verification of American Legion Affiliation.)**
- 3. Applicant must be a graduating High School senior.**
- 4. Applicant must live in Georgia.**
- 5. Applicant must be sponsored by a Ninth District (Dept. of Georgia) American Legion Post.**
- 6. Academic requirements include students accumulated grade point average (GPA), class ranking and standardized test scores (SAT). Official records must be furnished.**
- 7. Applicant must have participation in school and community activities.**
- 8. This award is to be given on the basis of Academic Scholarship in core “only” subjects on 4.0 basis.**
- 9. Applicant must have transcript of grades. Transcript must be official document from High School and in a sealed envelope.**
- 10. One Scholarship will be awarded of \$1000.00. A payment of \$1000.00 for the Fall semester will be paid directly to the school the recipient will attend.**
- 11. Applications must be received by April 15, of this year.**
- 12. Applicant must have an endorsement from the sponsoring Post and High School Principal.**
- 13. Winner of Scholarship must contact Scholarship Committee by August 1<sup>st</sup> with notification of College they will attend. Check will be made to College to be applied to applicant’s account.**
- 14. Applications must be mailed to:**

**American Legion Post 251  
2760 Duluth Hwy 120  
Duluth, GA 30096  
Attention: 9<sup>th</sup> District Scholarship (Thom Mash)**