

Veterans of Foreign Wars Scholarship

Amount: TBA

Criteria:

Open to graduating 2024 seniors

Students will be attending a college, military academy, technical or vocational school in 2024.

Verifiable proof of family membership to a VFW (Including Auxiliary) *See application for details.

Essay *See application for details.

Deadline:

Sponsor must receive the complete application packet on or before April 19, 2024.

Mail to:

Attn: Commander Mary Gowin

752 N Grange Hall Rd

Madison, IN 47250

OR

Turn in at the

Veterans of Foreign Wars, Post 1969

3100 N Michigan Rd

Madison, IN 47250

**** If you would like for the guidance office to mail on your behalf, submit the complete application packet to the guidance office on or before April 12, 2024.**



Weber-Warren Lewis Post 1969

3100 N. Michigan Rd,

Madison, IN 47250

Scholarship Program Application

Scholarships are available to Graduating Senior's for the year 2024. Criteria for this Scholarship are:

1. This student will be attending a College, Military Academy, Technical or Vocational School in 2024.
2. Verifiable proof of family membership to a Veterans of Foreign Wars (Including Auxiliary). Verifiable proof would include the member's name, a copy of their membership card, a DD 214, or their memberships number with the State that they belong to.
3. A typed essay on "What Does a Veteran Mean to You." Use Times New Roman, 12 fonts. Your essay must be your original work and you must be the sole author.
4. The body of your essay must not identify you in any way, (Including, but not limited to, your name, school, city, state, race, or national origin).
5. Length should be 400-500 words.
6. A 3x5 or 5x7 picture.
7. Scholarship monies will be distributed to the winners upon being announced.
8. You may only enter one time.
9. Deadline: Application and essay to be turned into the Veteran's of Foreign Wars, Post 1969, 3100 N. Michigan Rd., Madison, IN by 19 April 2024. Mark **ATTN: Commander Mary Gowin or Mail to Mary Gowin, 752 N Grange Hall Rd, Madison, IN 47250**
10. If you have any questions, please contact your Guidance Counselor, Principal, or us.

Student Information:

Student Full Name (Print): _____

School Attending Currently: _____

Phone #: _____

Address: _____

Parent/Guardian Information:

Name (Print): _____

Phone #: _____

E-Mail Address: _____

Name (Signature): _____ Date: _____

Teacher's Name and Email:

Name (Print): _____

Phone #: _____

Schools You Are Considering Attending:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____