

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit*

_____ *City* _____ *State* _____ *ZIP Code*

Home Phone: _____ Cell Phone: _____

College of Choice

1st Choice: _____ 2nd Choice: _____

Course of Study: _____

Life Goals: _____

VFW Member Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit*

_____ *City* _____ *State* _____ *ZIP Code*

Primary Phone: _____ Cell Phone: _____

Circle Your Membership: Regular Mens / Mens Auxiliary / Ladies Auxiliary

Relationship to Applicant: _____

Rules for Applicant: Recipient must complete one full year of college or graduate. If recipient does not follow through with the rules of the scholarship then all scholarship money must be returned to the VFW Post 6515.

Rules for Members: Regular and/or Auxiliary Members must belong to VFW Post 6515 for at least one year in order for family member to be eligible to apply for the VFW Scholarship Fund.

Scholarship Applications: Must be turned in by April 15th to be eligible.

Completed applications must be turned in at the VFW not the high school

Applicants Signature

Members Signature