



AMVETS

Department of Nebraska

SCHOLARSHIP APPLICATION



APPLICANTS: Please read the instructions carefully. ALL sections of this application must be completed in order to be considered for a scholarship. If an item does not apply to you, indicate N/A on the line. If needed, attach additional sheet(s). Applicants must be a member, child, grandchild, or stepchild of a member or deceased life member of AMVETS Department of Nebraska. Up to two scholarships of \$500.00 each may be awarded annually. Applicants may be any high school or undergraduate student who will be attending an undergraduate program next school year. Scholarships may be used at any technical, community, 2-year, or 4-year college in the United States. There is no limit to how many times students may receive this scholarship as long as they reapply each year and continue to make satisfactory progress in their program.

When filling out the application, please type or print the requested information.

This application is CONFIDENTIAL and will be reviewed only by the Scholarship Committee.

NOTE: This is a SCHOOL EXPENSE ONLY scholarship. Please answer questions as completely as possible.

Attach a separate typed sheet giving a brief summary of any circumstances (personal, family, financial, etc.) you feel the committee should know regarding why you need this scholarship.

SECTION 1: APPLICANT INFORMATION

NAME: _____	ADDRESS: _____
PHONE #: _____	_____
DATE OF BIRTH: _____	U.S. CITIZEN: _____
MARITAL STATUS: _____	
EMPLOYER: _____	LAST YEARS INCOME: _____
TOTAL ESTIMATE COST OF ONE YEAR OF COLLEGE: _____	SOCIAL SECURITY #: _____ (required of award winners)
Parent's contribution next academic year: _____	Your contribution: _____
List other aid received for next year: _____	_____
Date of graduation: _____	Name of high school attended: _____
Name of college accepted to: _____	
Ages of all other dependents living with your parents: _____	

SECTION 2: SPONSOR INFORMATION

AMVETS MEMBER'S NAME: _____	RELATIONSHIP: _____
POST NUMBER: _____	MEMBER ID #: _____

**On the back of this form or on a separate sheet, write a brief statement about your educational goals.*

**Attach a copy of your most recent grade transcript. An unofficial copy from the school is acceptable.*

All information on this application is true to the best of my knowledge.

Signature of Applicant

APPLICATION DEADLINE IS APRIL 1st

Return this completed form and all supporting documentation to:

AMVETS DEPARTMENT OF NEBRASKA
 Exec. Director/Finance Officer
 Deborah L. Wehrli
 1075 Nebraska St.
 Blair, NE 68008-1703
 402-682-1143 coldwarvet81@yahoo.com

