



AMERICAN GI FORUM OF KANSAS

NATIONAL VETERANS' FAMILY ORGANIZATION

STATE SCHOLARSHIP APPLICATION

1. Name _____
Last First M.I.

2. Permanent Address: Street _____
City _____ State _____ Zip _____

3. Telephone (____) _____ E-Mail: _____
Cell Phone (____) _____

4. Date of Birth _____ / _____ / _____ Social Security No. _____

5. Are you a member of the American GI Forum of Kansas? Yes No _____
Chapter

6. Father's Name _____
Mother's Name _____

7. Ethnic Background (optional): Hispanic Other _____

8. Are you a full time student attending a vocational school, college, or university? Yes No
If yes, name of school: _____ Major _____

Street _____

City _____ State _____ Zip _____

Grade Level (example – 1st year, sophomore, etc.) _____

Would like to attend:

1st Choice: _____ Major _____

Street _____

City _____ State _____ Zip _____

2nd Choice: _____ Major _____

Street _____

City _____ State _____ Zip _____

9. Personal Statement: Please attach to application a one (1) page personal statement in which you address the following: (a) career goals; (b) achievements, including academic and personal; (c) how you plan to help the American GI Forum in helping others like yourself in the future; (d) your involvement with your Chapter in past and present; (e) any other information relevant to this application.

“EDUCATION IS OUR FREEDOM AND FREEDOM SHOULD BE EVERYBODY’S BUSINESS”

10. Scholarship need analysis:

- a. Cost of Education for current year: \$_____ (tuition, fees, housing, books, other expenses).
 - b. Aid received from college/university \$_____ (Pell Grants, Work study, scholarships).
 - c. Other Aid: \$_____ (other scholarships)
 - d. Income earned from work: \$_____
- Total Unmet Need: \$_____

11. Transcript: A transcript of your high school or recent college work must accompany this application. First year graduate/professional school students are to send their undergraduate transcripts. College freshmen and sophomores must include high school transcripts. **(Grade card or grade reports are not acceptable.)**

12. References: Two (2) letters of recommendation are required, one from a school official on school letterhead, who can discuss your academic and personal achievements, as well as your potential for future success. One letter from your Local Chapter Commander or Chairwoman addressing your and/or your family's involvement with local, state, and national AGIF activities and meetings.

Privacy Act Statement:

You are requested to furnish information and Social Security Number for the purpose of Scholarship Selection Only.

CERTIFICATION

I (we) hereby certify that all the information on this form is true and complete to the best of my (our) knowledge. I further certify that I will use the AGIF-Kansas Educational Fund award toward expenses related to attendance at my College/University or vocational-technical school. I understand that I or a member of my family must be present at the AGIF State Conference to accept the scholarship.

Date _____ Signed _____
Applicant

Date _____ Signed _____
Parent or Guardian

Date _____ Signed _____
Chapter Commander or Chairwoman