

GREAT FALLS LEGION OF HONOR SCHOLARSHIP APPLICATION

GENERAL INFORMATION

Two scholarship awards to graduating seniors from Great Falls are funded by the Legion of Honor Foundation for \$500 each. **Awards are limited to a branch of the Montana University system.**

To be eligible, an applicant must be a graduating high school senior from Cascade County and they or an immediate family member (father, step father, mother, step mother, brother, sister, grandfather, grandmother) must have an affiliation with a Masonic Organization.

Deadline for submitting completed applications with supporting data to the person named below is **February 15th**. Attach supporting data in the following order.

1. A **typed personal letter** summarizing the intended education goals.
2. **Two separate letters of reference** from teachers, ministers, employers or other persons none of whom are related but well acquainted with the applicant.
3. A **transcript of grades and course lists**, current to the submission of the application.

The Legion of Honor reserves the right to retain all applications; none will be returned. Application information is not intended for public distribution, but the Legion of Honor may reveal information therefrom concerning winners as it deems appropriate for the occasion. Neatness in preparation shall count along with need, character, leadership, scholastic achievement, and extra-curricular activities. Application folders or covers are not necessary.

In August a check will be issued in the winner's name to the university, college or school to which the winner has been accepted and in attendance.

If interested and eligible, complete and return this application by **February 15th** to:

Mr. Steve Bennetts
2304 6th Ave S
Great Falls, MT 59405

THIS SCHOLARSHIP APPLICATION FORM MAY BE DUPLICATED AS NEEDED.

GREAT FALLS LEGION OF HONOR APPLICATION

Name _____ Social Security # _____

Home Address _____ Telephone _____

City _____ State _____ Zip _____

Date of Birth _____ Place _____

List all public high schools attended and location of each:

Graduation Year _____ Cumulative GPA (grades 9-2) to date _____

High School activities and offices held _____

Non-school organizations and offices held _____

College of attendance-freshman year. (Must be a Montana public university, college, junior college or technical school)

Complete mailing address _____

Proposed major(s) _____

Intended vocation _____

Father's Name _____

Residence _____

Mother's Name _____

Residence _____

Guardian (if any) _____

Residence _____

Are you, or your immediate family, a member of a Masonic Organization?

Name of Masonic Organization _____

Name of Family member _____

Location _____

Length of Membership _____

STATEMENT OF APPLICANT

I hereby certify that I am in need of this scholarship in order to continue my education. If granted, I will use the proceeds to apply on the payment of tuition and fees or other expenses at the school or college specified. To this end, I agree:

1. To inform the Legion of Honor in the event my school program is interrupted or terminated.
2. To keep the Legion of Honor advised of my current address while at school or college, or any change during the period of use of my scholarship award.
3. To the terms and conditions set forth in this application.
4. That the information submitted is complete and correct the the best of my knowledge.

Date _____ Signature _____

Applicant

STATEMENT OF PARENT OR GUARDIAN

I have read this application. I attest to the accuracy thereof to the best of my knowledge. I understand that the applicant is applying for a Legion of Honor Scholarship, and I have no objection thereto.

Date _____ Signature _____

Relationship _____

APPLICANT—PLEASE DO NOT WRITE BELOW THIS LINE

Name of Applicant _____

Masonic Organization _____

Date of application _____

Amount of Scholarship Award _____

Award check issued to _____ Date _____