



## Veterans of Lansingburgh, Inc.

ATTENTION: SCHOLARSHIP COMMITTEE

777 1<sup>st</sup> Avenue

Troy, NY 12182

Phone: 518-233-8656

[www.thelansingburghvets.com](http://www.thelansingburghvets.com)



### - VETERANS OF LANSINGBURGH 2019 SCHOLARSHIP AWARD -

The **VETERANS OF LANSINGBURGH, INC.** is a non-profit organization whose members are active and retired military, veterans, sons' of veterans and ladies' auxiliary members.

We are awarding one (1) **\$1,000.00 SCHOLARSHIP AWARD** to a high school senior who attends CATHOLIC CENTRAL HIGH SCHOOL, LANSINGBURGH HIGH SCHOOL, LASALLE INSTITUTE OR TROY HIGH SCHOOL. We are looking for a well-rounded student who understands the importance of being CHARITABLE IN SERVING VETERANS THROUGH VOLUNTEERISM.

#### **ELIGIBILITY: YOU ARE ELIGIBLE TO APPLY FOR THE SCHOLARSHIPS AWARD IF:**

1. You are a direct descendant, i.e. child, grandchild, or legally adopted, of a U.S. Veteran who served on active duty in the Armed Forces or was a member of a Reserve or National Guard component and was either honorably discharged or is still in that capacity.
2. Applicant must be a high school senior who is currently attending: CATHOLIC CENTRAL HIGH SCHOOL, LANSINGBURGH HIGH SCHOOL, LASALLE INSTITUTE OR TROY HIGH SCHOOL.
3. Applicant must be accepted and plans to attend college or a trade school to further their education.

#### **APPLICATION INSTRUCTIONS:**

1. Complete the **APPLICATION AND VOLUNTEER WORKSHEET(S)**.
2. Submit a copy of the Veteran's **DD214** or **WD AGO Form 53-55** as proof of service.
3. Submit a written essay entitled: **"VOLUNTEERING MY TIME TO VETERANS IS IMPORTANT."**
4. Mail or hand-deliver your packet to the above address. Packet must be received by **May 3, 2019.** **(No Exceptions!)** \*Do NOT SUBMIT ORIGINALS! INFORMATION SUBMITTED WILL NOT BE RETURNED. **DOCUMENTS NOT REQUIRED (RESUMES, TRANSCRIPTS, ETC.) SHOULD NOT BE INCLUDED.**

#### **THE WINNER:**

A Board Member will contact all applicants to confirm receipt of his/her application.

The Winner will be contacted via phone to advise he/she is the winner of this year's **\$1,000 SCHOLARSHIP.**

**THE WINNER IS EXPECTED TO BE PART OF OUR MEMORIAL DAY PARADE ON MONDAY, MAY 27, 2019.**

More information will be provided by Jim Theakos. The monetary award will be presented to the winner immediately after the Memorial Day Parade during the award ceremony at the Vets Club (777 1<sup>st</sup> Ave.).

**Questions? Contact Jim Theakos at 518-428-8098.**

VETERANS OF LANSINGBURGH, INC.  
**2019 SCHOLARSHIP AWARD APPLICATION**

**DEADLINE: MAY 3, 2019**

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Street: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Relationship to Veteran whose discharge you have attached: \_\_\_\_\_  
**\*Why should you receive this "Volunteer" Scholarship?** \_\_\_\_\_

**HIGH SCHOOL INFORMATION:** High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
Guidance Counselor Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

**COLLEGE and/or TRADE SCHOOL where you have been accepted or expect to attend:**  
Name / Location: \_\_\_\_\_  
Point of Contact (include title): \_\_\_\_\_ Phone No. \_\_\_\_\_  
List all scholarships that you have, or know you will receive: \_\_\_\_\_

**VOLUNTEERISM / COMMUNITY SERVICE:** Complete the attached Volunteer Worksheet.  
(Please make copies of this form if your volunteerism exceeds the space.)  
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- Should you win this **SCHOLARSHIP AWARD** are you willing to participate in our Annual **MEMORIAL DAY PARADE ON MEMORIAL DAY, MONDAY, MAY 27, 2019?** YES \_\_\_\_\_ NO \_\_\_\_\_

In submitting this application, **I certify that the information above and the attached essay were completed by me (the student).** The information is complete and accurate to the best of my knowledge. I understand and agree that, falsification of information will result in termination of this application. If I am selected as the winner, I understand, agree and grant permission to the Veterans of Lansingburgh, Inc. to use my name, photo, and essay in announcing and promoting this scholarship program. I understand and agree that the Veterans of Lansingburgh, Inc. is solely responsible for the selection of the winner and their decision is final. I have completed the application and all required attachments.

\_\_\_\_\_  
**STUDENT SIGNATURE**

\_\_\_\_\_  
**DATE**

I have read the eligibility/instruction information. I certify that my child is eligible for this scholarship. This application and essay were completed by my child named above. The volunteer information is true and not falsified. Proof of relationship per the above is enclosed (DD214/53-55). If my child is selected as the winner, I understand, agree and grant permission to the Veterans of Lansingburgh, Inc. to use his/her name, photo, and essay in announcing and promoting this scholarship program. I will ensure my child arrives on time for the **May 27, 2019** to be part of the Memorial Day Parade and receive his/her award.

\_\_\_\_\_  
**PRINTED NAME OF PARENT**

\_\_\_\_\_  
**DATE**