

## **VFW Post 2996 Scholarship Scholarship Award Guidelines**

### Eligibility

Applicants must be graduates of Parkside or Wicomico High Schools in Wicomico County who have selected their college or university and have been accepted for admission as a full-time student. The field of study is not restricted, and is left up to the scholarship recipient. Recipient must attend an accredited two- or four-year institution of higher education.

### Criteria

Applicants will be selected based on the following criteria:

- Demonstrated academic achievement
- Ranks in the top 25% of the graduating class
- Involved in school extracurricular activities
- Involved in community activities and/or part-time work
- Displays a positive attitude, along with respect and consideration for others
- Has a demonstrated financial need. Financial need shall be considered, but shall not be a prime determining factor.

How to Apply: Applications are available on the CFES Website or High School Guidance office. Completed applications must be submitted no later than April 15th of the current school year, to be eligible for fall semester assistance. An application is complete, and considered for a scholarship award, only when the following have been submitted:

1. A completed scholarship application
2. Official high school transcript of grades
3. Letter of acceptance from college or university
4. A copy of parent/guardian and student's most recent income tax return
5. Three letters of reference. Indicate relationship (teacher, minister, etc.)

Award amounts will be a minimum of \$500.00

VFW POST 2996 SCHOLARSHIP APPLICATION

Student Name \_\_\_\_\_  
Last First M.I.

Permanent Address \_\_\_\_\_  
Street

Telephone ( ) \_\_\_\_\_ Social Security Number \_\_\_\_\_  
City State Zip

e-mail address \_\_\_\_\_

How long have you been a resident of your County? \_\_\_\_\_

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_  
Month/Year

\_\_\_\_\_ ( ) \_\_\_\_\_  
Address Telephone

Parent's Occupation (If both work, please list separately)  
\_\_\_\_\_  
\_\_\_\_\_

Adjusted gross Income as shown on most recent Federal Tax Return \_\_\_\_\_

Number of Children in Family \_\_\_\_\_

Currently Attending College \_\_\_\_\_

Anticipated financial aid/scholarships from other sources \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anticipated cost \_\_\_\_\_

List High School Extracurricular activities and athletics, along with Offices held (Can attach) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List Community Activities and Offices held \_\_\_\_\_

List paid work experience \_\_\_\_\_

College or University for which aid is requested \_\_\_\_\_

\_\_\_\_\_ ( ) \_\_\_\_\_  
Address Telephone

Entrance Date \_\_\_\_\_

List Extracurricular Activities, Work experience, Community service, Volunteer projects  
in which you have participated (attach additional sheet if necessary): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submit Application to: Eastside Memorial VFW Post 2996  
P.O. Box 51  
Powellville, MD

**APPLICATION DEADLINE: April 15<sup>th</sup>**

I certify that I am a legal resident of Wicomico County, State of Maryland and that all  
information on this form is true and complete to the best of my knowledge.

\_\_\_\_\_  
Students Signature Date Parent's Signature Date