

AMERICAN LEGION AUXILIARY • DEPARTMENT OF NORTH DAKOTA 1801 23rd Ave N Rm 113, Fargo, ND 58102-1047 • 701-253-5992 secretary@ndala.org • www.ndala.org

2021-2022 Department of North Dakota Education Program Scholarship

The American Legion Auxiliary, Department of North Dakota, through its Education Program has a program to assist students pursuing a degree in the field of their choice. Scholarships of \$500 will be awarded to worthy applicants attending a college, university, or trade school in North Dakota. Scholarship funds will be paid by March 1, 2022, to the school of choice after the applicant can verify enrollment and satisfactory academic progress. Membership and/or affiliation with the American Legion and American Legion Auxiliary is not required for scholarship selection. Need is an import factor in determining the recipient of the scholarships.

Please type or print response neatly. Return the completed application, two letters of recommendation and essay by April 1, 2022, to: Shauna Dubuque, Department Education Chairman, P O Box 251, Glyndon, MN 56547-0251. Phone: 701-491-8776

Applicant's Full Name: Applicant's Mailing Address:				
Date of Birth: Name and address of Parents or Guard	Month/Day/Year			
Street address:	City:	Sta	te:	Zip:
School(s) currently attending:				
Would you be able to continue school	without additional assist	tance?	☐ Yes	□ No
How much of your school expenses must you earn?		□ 25%	□ 50%	□ 100%
List any positions you have held in ga	ainful employment; perio	ds of employmen	nt and average	time employed
each week. Use back of form if more	space is needed.			
For our records				*
Are either of your parents eligible for	the American Legion or	the American Le	gion Auxiliary	√? □ Yes □ No
If yes, are they members? ☐ Yes I	☐ No If yes, where?			
Are you a member of the American L	egion or American Legio	on Auxiliary? 🏻	Yes □ No	
If yes, for how long?				



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(Name of applicant) is applying for the American Legion Auxiliary Department

Recommendation by a school administrator (principal, counselor, teacher, advisor, or similar position)

Education Program Scholarship.			-
Please comment on the following. Use back of Need for assistance	form if needed.		
• Character and Citizenship		8	
Attitude and Cooperation			
Potential for reaching goals	owit.		
 Additional comments regarding m 	erit		
Use back of form if more space is needed. (Ple	ease type or print)		
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Relationship to Applicant:			
Name of Reference (Please Print):			
Signature of Reference:			
Address:			
City:	State:		



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Recommendation by pastor, community leader, mentor, or employer (not a parent)

	(Name of applicant) is ap	plying for the American Legion Auxiliary
Department Education Program Scho	olarship.	
Please comment on the following. Us Need for assistance	se back of form if needed.	
 Character and Citizenship)	
 Attitude and Cooperation 	L	
 Potential for reaching goal 	ls	
 Additional comments rega 	arding merit	
Use back of form if more space is ne	eded. (Please type or print)	
		1 71 -
Relationship to Applicant:		
	:	
Signature of Reference:		Date:
Address:		
City:	State:	



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Write (please type or print) an approximate 200-word essay on your life, education, and goals. Proper spelling and grammar are important.				
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	*			
If chosen for this award, the funds should be sent to	(School Name)			
	(School Address)			
Applicant's Signature:	Date:			
Parent or Guardian's Signature:				

Return completed application, 200-word essay and two letters of recommendation by April 1, 2022, to:

Shauna Dubuque, Department Education Chairman P O Box 251 Glyndon, MN 56547-0251 Phone: 701-491-8776