

**AMERICAN LEGION AUXILIARY**  
**Department of Nebraska**

**ROBERTA MARIE STRETCH**  
**MEMORIAL SCHOLARSHIP**

The Roberta Marie Stretch Memorial Scholarship of \$400 will be awarded to a qualified applicant enrolled or accepted into an undergraduate or graduate (masters only) program at a four year college or university. Applicant must be veteran connected and a resident of Nebraska. Preference will be given to former Nebraska Girls State Citizens. If selected the scholarship must be used within the year selected. *Funding not released by January 1<sup>st</sup> will not be awarded.*

Please fill out questionnaire (online, by typewriter, or using legible printed hand writing if necessary) and return with all data under No. 8 in one packet to a Nebraska Unit President by **MARCH 1, 2017.**

*To be completed by Unit for Student*

Unit # \_\_\_\_\_ Unit Location \_\_\_\_\_ Unit Contact \_\_\_\_\_

**This is a \$400 Scholarship.** Mail required documents to \_\_\_\_\_

**(IF YOU HAVE ANY QUESTIONS ON WHERE TO SUBMIT THIS COMPLETED APPLICATION CALL - 402.466.1808)**

1. Name of applicant \_\_\_\_\_
2. In what school are or were you last enrolled? \_\_\_\_\_ Grade: \_\_\_\_\_  
Is this a: Public School \_\_\_\_\_ Home School \_\_\_\_\_ Other (Explain) \_\_\_\_\_  
GPA: \_\_\_\_\_ If not in school, state occupation: \_\_\_\_\_
3. Are you receiving or do you expect to receive other assistance? Yes \_\_\_\_\_ No \_\_\_\_\_  
What kind? \_\_\_\_\_ (Scholarship, grant, etc.) Amount? \_\_\_\_\_
4. Will your family or guardian give you financial aid to continue your education? Yes \_\_\_\_\_ No \_\_\_\_\_
5. By whom are you veteran connected? Self \_\_\_\_\_ Spouse \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Brother \_\_\_\_\_ Sister \_\_\_\_\_  
Grandfather \_\_\_\_\_ Grandmother \_\_\_\_\_ Great-grandfather \_\_\_\_\_ Great-grandmother \_\_\_\_\_ Step-relative \_\_\_\_\_ Other \_\_\_\_\_
6. Are you a graduate of "Cornhusker" Girls State? Yes \_\_\_\_\_ What year? \_\_\_\_\_ No \_\_\_\_\_
7. College or University you hope to attend: \_\_\_\_\_  
Course of study: \_\_\_\_\_  
Length of course of study: \_\_\_\_\_ Tuition: Quarter \$ \_\_\_\_\_; Semester \$ \_\_\_\_\_; Year \$ \_\_\_\_\_

The following **MUST** be included with your application.

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

8. Two (2) letters of recommendation from:
  - a) One (1) letter from an employer, if not employed one (1) letter from a professional associate.

One (1) letter from a teacher, if not a current student one (1) letter from a character witness.

- b) Essay from applicant, stating chosen major and why you chose this field.  
(A list of community, church, and school activities may be enclosed, but is not required).
- c) Letter of acceptance (tentative or final) from school of higher education.
- d) Transcript of high school (or college) grades.

**ALL LETTERS MUST BE SIGNED AND DATED TO QUALIFY**

- e) Name, occupation and annual net income of father, mother and/or applicant and spouse as applies.  
Please include how many are in the home and how many children at home or in college.  
(This may be enclosed in a sealed envelope)

For further information you may contact:  
American Legion Auxiliary Department Headquarters  
PO Box 5227 - Lincoln, NE 68505-0227 or Phone (402) 466-1808  
neaux@windstream.net – www.nebraskalegionaux.net

Signature of Applicant: \_\_\_\_\_

USPS delivers mail to: \_\_\_\_\_

City: \_\_\_\_\_, Nebraska - Zip Code \_\_\_\_\_

**APPLICATIONS WILL NOT BE ACCEPTED BY INDIVIDUALS.**

To qualify for judging application must be submitted by a Nebraska American Legion Auxiliary Unit.

Unit # \_\_\_\_\_ Unit Location \_\_\_\_\_

This application was reviewed by an officer of the above Unit and contains the information requested in No. 8.

Signature \_\_\_\_\_ Daytime phone number \_\_\_\_\_

**Note to Unit President / Officer:**

- ✓ Put your Unit's "mail to" information on the first page of application
- ✓ It is the Unit's responsibility to check the contents of this scholarship application to be sure all the requested letters and documents are enclosed.
- ✓ Signature and phone number of Unit Officer that verified contents requested in No. 8 are included.
- ✓ Each Unit may submit only one of each Nebraska scholarships / *and only one of each National scholarships.*
- ✓ Mail the completed Department Scholarship application to A.L.A., PO Box 5227, Lincoln, NE 68505, postmarked by March 15, 2017.
- ✓ Any application postmarked **after March 15, 2017 will not be considered.**

The Unit may submit **ONE Roberta Marie Stretch Memorial Scholarship Application** to the American Legion Auxiliary Department Headquarters for consideration. The Unit's selection must be postmarked no later than **March 15, 2017**. For more information see the Education article in the 2016-2017 ABC Book.

Accounting Expense Code - 224532