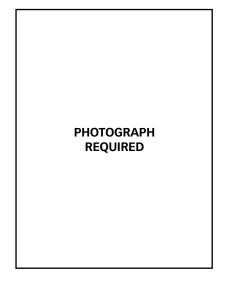


THE AMERICAN LEGION BASEBALL SCHOLARSHIP

NOMINATION FORM





Name: ___

Address:

City

Email address:

Phone # (

Eligibility Requirements

)_____

Street

State

The player must:

- Attach a copy of his official high school transcript.
- Have graduated from high school.
- Be on a current roster (American Legion National Baseball Electronic Registration Form) filed with National Headquarters.
- Be part of a team affiliated with an American Legion post.
- Have three letters of testimony attached to application.

NOMINATION INSTRUCTIONS

Any team manager or head coach of an American Legion (post-affiliated) team may nominate a player for consideration of this award. The scholarship application, letters of recommendation and certification form must be completed, postmarked and mailed to the department headquarters no later than July 15. Three letters of testimony must be attached to the nomination form.

Attach a one-page letter of recommendation from your:

- (1) Legion coach or team manager
- (2) American Legion post commander or adjutant
- (3) Community leader, (i.e. teacher, minister, Scout leader, church leader, principal)

Each Department Baseball Committee will select an American Legion player who best meets the qualifications as the American Legion Baseball Scholarship winner. Each department winner will receive a scholarship from The American Legion of \$500 or more.

DIAMOND SPORTS SPONSORSHIP

The Department Baseball scholarship winners shall be considered for The American Legion All Academic Team sponsored by Diamond Sports, the official baseball for American Legion national tournaments. Eight players selected by a scholarship selection committee at The American Legion World Series will receive an additional \$2,500 scholarship. A ninth player, selected as the most outstanding member of the All Academic Team, will be awarded an additional \$5,000 scholarship.

Scholarship recipients will be eligible to receive their scholarships immediately upon graduation from an accredited high school. Scholarship winners must utilize the total award within eight (8) years of their graduation date, excluding active military duty.

The scholarship may be used to attend a school selected by the student, provided it is state accredited and above the high school level.

The American Legion's national treasurer will make disbursement from the scholarship fund jointly to the student and the school at the beginning of each semester.

7IP

S	ection A – High S	chool Reco	ord
Note: Please attach a copy of your high school transcrip Name of high school:			
Grade Point Average:	_ In upper	% of class	Number in class:
List activities in which you participat any school or community organizatic you have received.	ed during high schoo ons in which you hav	ol. List awards e held membe	, honors and recognition received. List ership. Also, list any other scholarships
	Section B – Co		
(1) What major do you plan to pursue	when you enter coll	ege? Why?	
(2) What college or university do you	plan to attend? Why?	,	
(3) Do you anticipate playing college t	baseball?		

Section C – Career Interests

Describe what you see yourself doing 10 years from today. The scholarship committee realizes that in many cases, applicants will not have decided on career goals. However, complete this section to the best of your ability.

Section D – Community Participation Record

Briefly describe any community service activities in which you have been involved during your high school career. If community service required, explain why.

Section E – Family Information

Father's name and occupation: _____

Mother's name and occupation:

List brothers and/or sisters and their ages:

Family's adjusted gross income: ____

This scholarship is partially based upon need. Therefore, the adjusted gross income from a federal income tax form is necessary. Describe any circumstances that may affect your family's ability to provide for your college education.

Section F – Letters of Recommendation and Testimony

Attached to this application must be three letters of testimony:

1) American Legion coach or team manager; 2) American Legion post commander or adjutant; 3) Community leader, school official or minister

CERTIFICATION BY PLAYER

I certify to the accuracy of the foregoing facts. If selected, I will permit The American Legion to use my name, image and/or likeness for publicity.

SIGNATURE OF AMERICAN LEGION BASEBALL PLAYER: ______ DATE: ______ DATE: ______

PARENT'S CONSENT

We hereby certify that the information on this application pertains to our son/daughter. If our child is selected as a scholarship winner, we understand and agree and hereby grant permission to The American Legion to use our child's likeness and name in announcing and promoting this scholarship program.

SIGNATURE OF PARENT OR GUARDIAN: _____ PHONE NI IMBER

PHONE NUMBER:	DATE:
PARENT'S ADDRESS: CITY, STATE & ZIP	

POST COMMANDER

The applicant above is qualified in every respect to represent The American Legion and has our recommendation.

SPONSORING POST # _

POST ADDRESS:

CITY, STATE & ZIP ____

_____ PHONE # _____

American Legion department (state) contact information is online: www.legion.org/departments

> Electronic applications are available online: www.legion.org/baseball

Authorization

D. 1 mm