



American Legion Post 211  
31972 Walker road  
Avon Lake, Oh 44012

**SCHOLARSHIP APPLICATION FORM**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

AGE: \_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_

NAME OF VETERAN MEMBER: \_\_\_\_\_

MEMBERSHIP NUMBER: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_