

**Matthew Brew Chapter #3 American Legion Riders  
MB/ND LEGACY SCHOLARSHIP APPLICATION**

(Please type or print)

The following Criteria must be met to qualify for one of seven \$500.00 Scholarships:  
This \$500.00 Scholarship will be paid out at the middle of the 2<sup>nd</sup> semester to the enrolled student.

Must be a Resident of North Dakota  
Must be enroll in Continued Education  
Must be a Son/Daughter of the following:

Military, Wounded Warrior, Disabled Vet, Survivor of a Military KIA

Mr.  
Name Ms. \_\_\_\_\_ Social Security Number \_\_\_\_\_

Mrs.              Last              first              middle

Home Address \_\_\_\_\_  
*street number or box                      city                      state                      zip*

E-mail Address \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ DOB \_\_\_\_\_

Relationship to Military Member \_\_\_\_\_

Branch of Service & years served \_\_\_\_\_

\_\_\_\_ Survivor of Military KIA                      \_\_\_\_ Son/Daughter Disabled Veteran

\_\_\_\_ Son/Daughter Wounded Warrior                      \_\_\_\_ Son/Daughter Military Veteran

What college or trade school (s) are you planning to attend? \_\_\_\_\_

Did/do you have an outside job during school (including summers)? \_\_\_\_ yes \_\_\_\_ no

IF YES: \_\_\_\_ part-time \_\_\_\_ full-time \_\_\_\_ summers only      Number of hrs / week \_\_\_\_\_

Do you have other scholarships? \_\_\_\_ yes \_\_\_\_ no      Partial \_\_\_\_ Full \_\_\_\_

Name and location of high school \_\_\_\_\_

When did you/will you graduate from high school \_\_\_\_\_

Approximate date of registration \_\_\_\_\_

What degree or trade are you pursuing? \_\_\_\_\_

What career choices are you considering: 1st choice: \_\_\_\_\_

2nd choice: \_\_\_\_\_ 3rd choice: \_\_\_\_\_

What year in school will you be in the upcoming semester? \_\_\_\_\_

What are your hobbies? \_\_\_\_\_

What activities, both school and civic, are you involved in? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What awards have you received? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Personal essay: (Optional)** on an additional sheet of paper, please write a brief essay stating your educational goals, your career objectives, and how your choice of school will help you in achieving these goals. Please limit essay to one type written page.

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

Interview Date: 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_

No interview dates or times can be guaranteed. The committee will set the dates and times. Your choices may help in scheduling. (For out of area applicants: some form of video interview will work)

All application material must be received by 04/15/2017

Please send completed applications to:

**Matthew Brew Chapter #3**  
**MB/ND Legacy Scholarship**

PO Box 3029

Dickinson, ND 58602

[chapter3alr@gmail.com](mailto:chapter3alr@gmail.com)

