



## Education

Education Purpose: to promote quality education for children, especially military and adults through classroom activities, literacy programs, scholarship promotion and support education beyond high school.

**Give 10 to Education program.** Units can contribute supplies to classrooms in your community,

**American Education Week:** November 15-19, 2021—Participate by bringing treats to the teacher lounge, apples, donuts or homemade goodies are a few ideas

**Invite Veterans to speak in classrooms:**

**Promote Scholarships:** National: 1. Children of Warriors National Presidents, 2. Spirit of Youth for Junior members, 3. Non-Traditional Student Scholarship .They can be found on [www.alaforveterans.org](http://www.alaforveterans.org) or [www.idahoala.org](http://www.idahoala.org)

Department Scholarships: 1. Traditional and non-traditional Nurses Scholarship, 2. General Studies –traditional and non traditional. They can be downloaded from [www.idahoala.org](http://www.idahoala.org).

**Awards:** Most outstanding Unit Education program; Most outstanding Scholarship program and Most outstanding Veterans in the Classroom Program. Each report must be in narrative form not to exceed 1000 words and due May 1, 2022 to Department Chairman.

Please take time to share a story about the positive impact you or someone has had on our mission.

Carmen Metzger, Department Education Chairman

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

208-590-2452



## Education Year End Report

May 2021 – May 1, 2022

Give 10 to Education: Number of items donated \_\_\_\_\_ \$ Value \_\_\_\_\_

Veterans in the Classroom: Number of veterans who participated \_\_\_\_\_

Approximate number of children attendance \_\_\_\_\_

American Education Week (November 15-19, 2021) Number of schools served \_\_\_\_\_ Hours \_\_\_\_\_

Cost in \$ \_\_\_\_\_

Teacher Appreciation Week (May 2-6, 2022) Number of schools served \_\_\_\_\_ Hours \_\_\_\_\_

Cost in \$ \_\_\_\_\_

Monetary donations to scholarship funds: Department \$ \_\_\_\_\_ National \$ \_\_\_\_\_

Unit scholarship awarded: Number \_\_\_\_\_ \$Amount \_\_\_\_\_ Type \_\_\_\_\_

Unit Award: Please submit a narrative not to exceed 1000 words. Don't forget to include the Award cover sheet. Due **May 1, 2022**.

Send report form to:

Carmen Metzger, Education Chairman  
4230 N. E. Alexander Way, Mountain Home, ID 83647

JCMetzger@gmail.com



**AMERICAN LEGION AUXILIARY  
TRADITIONAL NURSES SCHOLARSHIP  
DEPARTMENT OF IDAHO  
2022**

One scholarship, either traditional, or non-traditional, in the amount of \$1,000 will be awarded at Department Convention.

**RULES**

Applicant must:

1. be a daughter, son grandson, granddaughter great-granddaughter, or great-grandson of a veteran who served in the Armed Forces during eligibility dates for membership in the American Legion.
  - a. April 6, 1917, through November 11, 1918 (WWI)
  - b. December 7, 1941 (WWII) to the present
2. be a resident Idaho
3. complete a non-traditional application if out of high school more than two years
4. enter and receive training at an accredited post-secondary facility within two years of scholarship award.
5. notify American Legion Auxiliary Education chairman if leaving school prior to program completion.

Include all the following: (applicant is responsible to ensure signatures and dates appear on letters of recommendation.)

1. complete application form
2. well-written letter of application to the ALA scholarship committee, signed and dated
3. letters of recommendation – official letterhead preferred – signed and dated form:
  - a. high school counselor or principal
  - b. non-family businessperson who knows you well
  - c. non-family member character witness
4. high school transcript including ACT or SAT scores
5. Eligible veteran’s certificate of honorable discharge (Form DD-214)
6. Current financial statement (FAFSA -Free application for Financial Student Aid)

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of parent or guardian where you reside \_\_\_\_\_

Date of high school graduation \_\_\_\_\_

University, college, or another post-secondary program you plan to attend  
\_\_\_\_\_

Extra-curricular activities and interests: may be included in letter of application

Family/guardian contribution to your education:

a. Per month \_\_\_\_\_ b. per year \_\_\_\_\_

Number of other dependent children in family \_\_\_\_\_

Your family position ( ) eldest ( ) middle ( ) youngest

\_\_\_\_\_  
Print or type full name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of application

**COMPLETE application must be received by local unit no later than May 1, 2022.  
Make a copy of completed application for your records.**

**\*\*EACH UNIT IS RESPONSIBLE TO VERIFY ALL NECESSARY INFORMATION IN THE APPLICANT'S PACKET**

Unit Name and Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Signature of Unit President/or Secretary

**\*\*Please send the application to the Dept Education Chairman Carmen Metzger  
4230 NE Alexander Way, Mountain Home, ID 83647 (208)  
587-7624 [JCMetzer@gmail.com](mailto:JCMetzer@gmail.com)**

\_\_\_\_\_  
Signature of Education Chairman

**Final decision is made by the Department Education Chairman and Education Committee.**

American Legion Auxiliary Traditional Nurses Scholarship Application on-line



**AMERICAN LEGION AUXILIARY  
GENERAL STUDIES SCHOLARSHIP APPLICATION - TRADITIONAL  
DEPARTMENT OF IDAHO  
2022**

One scholarship, either traditional, or non-traditional, in the amount of \$1,000 will be awarded at Department Convention.

**RULES**

Applicant must:

6. be a daughter, son grandson, granddaughter great-granddaughter, or great-grandson of a veteran who served in the Armed Forces during eligibility dates for membership in the American Legion.
  - a. April 6, 1917 through November 11, 1918 (WWI)
  - b. December 7, 1941 (WWII) to the present
7. be a resident Idaho
8. complete a non-traditional application if out of high school more than two years
9. enter and receive training at an accredited post-secondary facility within two years of scholarship award.
10. notify American Legion Auxiliary Education chairman if leaving school prior to program completion.

Include all the following: (applicant is responsible to ensure signatures and dates appear on letters of recommendation.)

7. complete application form
8. well-written letter of application to the ALA scholarship committee, signed and dated
9. letters of recommendation – official letterhead preferred – signed and dated form:
  - d. high school counselor or principal
  - e. non-family businessperson who knows you well
  - f. non-family member character witness
10. high school transcript including ACT or SAT scores
11. Eligible veteran's certificate of honorable discharge (Form DD-214)
12. Current financial statement (FAFSA -Free application for Financial Student Aid)

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of parent or guardian where you reside \_\_\_\_\_

Date of high school graduation \_\_\_\_\_

University, college, or another post-secondary program you plan to attend  
\_\_\_\_\_

Extra-curricular activities and interests: may be included in letter of application

Family/guardian contribution to your education:

b. Per month \_\_\_\_\_ b. per year \_\_\_\_\_

Number of other dependent children in family \_\_\_\_\_

Your family position ( ) eldest ( ) middle ( ) youngest

\_\_\_\_\_  
Print or type full name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of application

**COMPLETE application must be received by local unit no later than May 1, 2022.**

**Make a copy of completed application for your records.**

**\*\*EACH UNIT IS RESPONSIBLE TO VERIFY ALL NECESSARY INFORMATION IN THE APPLICANT'S PACKET**

Unit Name and Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Signature of Unit President/or Secretary

**\*\*Please send the application to the Dept Education Chairman Carmen Metzger**

**4230 NE Alexander Way, Mountain Home, ID 83647**

**(208) 587-7624 [JCMetzer@gmail.com](mailto:JCMetzer@gmail.com)**

\_\_\_\_\_  
Signature of Education Chairman

**Final decision is made by the Department Education Chairman and Education Committee.**

American Legion Auxiliary General Studies Scholarship Traditional Application available online



**AMERICAN LEGION AUXILIARY  
DEPARTMENT OF IDAHO  
NON-TRADITIONAL SCHOLARSHIP APPLICATION  
2022**

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

I am a member of good standing of:

\_\_\_\_\_ American Legion Auxiliary                      Unit name and number \_\_\_\_\_

\_\_\_\_\_ American Legion                                      Post name and number \_\_\_\_\_

\_\_\_\_\_ Sons of the American Legion                      Squadron name and number \_\_\_\_\_

Member number \_\_\_\_\_ Date of enrollment \_\_\_\_\_

Relationship to veteran \_\_\_\_\_ Attested: \_\_\_\_\_  
Unit Secretary

**Scholarship Information**

Date of high school graduation: \_\_\_\_\_

Attach copy of high school transcript (if graduated in the last 10 years.)

College last attended \_\_\_\_\_

Attach copy of most recent transcript. If it has been more than five years since applicant has attended school, submit work resume. **Financial information:**

Applicant's adjusted gross income \$ \_\_\_\_\_ (AGI) Form 1010 -Line 31; 1040A -Line 6e; 1040EZ -Line 4.)

List support or income from other sources: \_\_\_\_\_

Number of Dependents: \_\_\_\_\_

Describe any circumstances that may affect support for your college education.  
Attach additional sheets if necessary.

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Character/leadership—Attach additional sheets if necessary

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Describe community service activities in which you have participated during high school, college, or career.

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List offices held and/or awards received:

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Initiative/goals

Describe which major you plan to pursue in college and why?

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Which college or university do you plan to attend and why? \_\_\_\_\_

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\_\_\_\_\_

Explain who or what inspired you to seek a college degree. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Type or print Name

\_\_\_\_\_  
signature Applicant's

Date: \_\_\_\_\_

**APPLICATION PACKET REQUIREMENTS:**

1. Completed application
2. Copy of college transcript if applicable
3. Work history – resume
4. Letter of recommendation from recent employer – official letterhead preferred – signed and dated
5. Copy of FAFSA (Free Application for Financial Student Aid) Form submitted for college assistance

**Complete application must be received by local unit no later than May 1, 2022. Make a copy of completed application for your records.**

**Unit chairman will verify and submit winning application to Department Education Chairman by June 1, 2022.**

**\*\*EACH UNIT IS RESPONSIBLE TO VERIFY ALL NECESSARY INFORMATION IN THE APPLICANT'S PACKET.**

Unit Name and Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Signature of Unit President/or Secretary

**\*\*Please send the application to the Dept Education Chairman Carmen Metzger  
4230 NE Alexander Way, Mountain Home, ID 83647 (208)  
587-7624 [JCMetzer@gmail.com](mailto:JCMetzer@gmail.com)**

\_\_\_\_\_  
Signature of Education Chairman

**Final decision is made by the Department Education Chairman and Education Committee.**

