

# The American Legion Department of Nebraska

STATE HEADQUARTERS PO BOX 5205 LINCOLN, NE 68505-0205  
(402) 464-6330

E-mail: [nebraska@legion.org](mailto:nebraska@legion.org) Web site: <http://www.ne.legion.org>

## MAYNARD JENSEN AMERICAN LEGION MEMORIAL SCHOLARSHIP PROGRAM

The American Legion, Department of Nebraska, has announced the availability of its annual \$500 scholarships for students planning to enroll in a Nebraska educational facility of higher learning for the Fall Semester.

Applicants must be a high school graduate or be earning sufficient credits to graduate from high school at the conclusion of the spring semester, or be enrolled full time in a post-secondary institution as of the application deadline date of **March 1**, and must be sons or daughters, grandchildren or great-grandchildren, adopted or stepchildren of members of Department of Nebraska, The American Legion or POW, MIA, KIA or any veteran that was a current American Legion member at time of death.

Applicants must be enrolled or in the process of being enrolled full time in an accredited Nebraska institution of higher education to include university, college or technical school, public or private.

Selection of recipients will be made on the basis of academic achievement, extracurricular activities, financial need, and the completion of all information requested in the application.

Scholarship stipends will be sent to the institution of the recipient's attendance to be held for use in their name for tuition and fees, books, room and board only.

An application form is enclosed which may be reproduced as needed.

Persons desiring additional information on this scholarship may address their inquiry to:

The American Legion  
PO Box 5205  
Lincoln, NE 68505-0205.  
Telephone: (402) 464-6338.

# MAYNARD JENSEN AMERICAN LEGION MEMORIAL SCHOLARSHIP PROGRAM

## GUIDELINES

1. Applicants must be sons or daughters, grandchildren or great-grandchildren, adopted or stepchildren of members of Department of Nebraska, the American Legion or POW, MIA, KIA or any veteran that was a current legion member at time of death.
2. Applicants must be a high school graduate or be earning sufficient credits to graduate from high school at the conclusion of the Spring Semester, or be enrolled full time in a Nebraska post-secondary institution as of March 1, application deadline date.
3. Applicants must be enrolled or in the process of being enrolled full time in an accredited **NEBRASKA** institution of higher education to include university, college, or technical school, public or private.
4. Selection of recipients will be made based on the following:
  - a. **All questions answered or N/A indicated.**
  - b. Financial need
  - c. Academic achievement
  - d. Extracurricular activities
5. Department of Nebraska American legion Scholarship Committee will evaluate applications and select recipients.
6. Scholarships must be used at the beginning of the academic year immediately following notification of awards. Use cannot be delayed nor can awards be held for future use or transferred to other individuals. **Scholarship must be used at school indicated on application.**
7. Scholarship stipends will be sent to the institution of the recipient's attendance to be held for use in their name for tuition and fees, book, room and board only. Should the recipient drop out of school, any unused money must be returned to the Department of Nebraska, American Legion.
8. Contact financial aid office to determine how a scholarship might affect other funding.
9. Winners will be announced through *The Nebraska Legionnaire* and letters to selectees. Recipients will receive scholarship funds allotted as follows:
  - \$250 awarded first semester
  - \$250 awarded second semester(In the case of trimesters or quarters, scholarship funds will be distributed accordingly.)

## INFORMATION AND INSTRUCTIONS FOR APPLICANTS

1. Completed application and required certifications must be enclosed in the same envelope and postmarked on or before the application deadline date of **March 1**
  2. Scholarship applications must be complete when received. Attachments are not acceptable. The following are required in order to receive consideration:
    - a. Copy of completed Scholarship Application (2 pages)
    - b. Copy of completed Financial Statement (2 pages)
    - c. Certification blocks must be signed by school official, applicant, and parent or guardian.
    - d. **A school seal or an official rubber stamp must be affixed to school certification.**
  3. Mail completed application & financial statement to:  
MEMORIAL SCHOLARSHIP  
PO BOX 5205  
LINCOLN, NE 68505-0205
- NOTE: *Application materials cannot be returned.*
4. Incomplete applications will not receive consideration. The sponsors and American legion personnel are not responsible for acquiring any data or forms for applicants. Do not include materials not specifically requested, such as folders, a resume, pictures, recommendations, transcripts, etc. There are not provisions for eligibility criteria waivers.
  5. Scholarship winners will be notified via first class mail by April 15.

# MAYNARD JENSEN AMERICAN LEGION MEMORIAL SCHOLARSHIP APPLICATION

1. \_\_\_\_\_  
Full Legal Name: Last, First and Middle
2. \_\_\_\_\_  
Marital Status
3. \_\_\_\_\_  
Date of Birth: Month, Day, and Year
4. \_\_\_\_\_  
Telephone No.
5. \_\_\_\_\_  
Permanent Home Address: Number, Street, City, State, Zip
6. \_\_\_\_\_  
Father, Stepfather, or Legal Guardian: Name: Last, First, Middle
7. \_\_\_\_\_  
Mother, Stepmother, or Legal Guardian: Name: Last, First, Middle
8. \_\_\_\_\_ 9. \_\_\_\_\_  
American Legion Member's Name Relationship to Applicant
- \*10. \_\_\_\_\_ \*11. \_\_\_\_\_  
American Legion Post No. Location of American Legion Post
12. STATUS: Deceased KIA MIA POW  
\_\_\_\_\_  
Name of deceased, KIA, MIA, or POW
13. List your school, community, or church activities in which you have participated:
14. List jobs (including summer employment) you have held in the pst three years.  
Explain the kind of work, employer, dates of employment and hours per week.
15. Indicate name of Nebraska college you will attend: \_\_\_\_\_  
Full mailing address of college: \_\_\_\_\_  
Phone number of college: \_\_\_\_\_
16. What career are you planning to pursue? \_\_\_\_\_
17. Please indicate in a 50 word or less essay why you have chosen this profession:

**PLEASE NOTE:**

- 1. Attachments are not acceptable**
- 2. All questions must be answered or N/A (not applicable) indicated.**

# SCHOOL CERTIFICATION

**HIGH SCHOOL/COLLEGE RECORD** – This section is to be completed by high school official or college registrar.

Cumulative Grade Point Average (GPA) based on the scale of A=4.0, as of graduation or completion of first semester current school year: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

\_\_\_\_\_  
Name of High School/College

\_\_\_\_\_  
Print/Type name of school official and title

(Affix school seal or official rubber stamp here)

\_\_\_\_\_  
Signature of School Official

\_\_\_\_\_  
Date

**NOTE: It is very important that the school's official seal or official rubber stamp is affixed to this application.**

# FINANCIAL STATEMENT

Student's Name: \_\_\_\_\_

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

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

*Please complete both sides of this statement as accurately as possible. Note: If your parents are divorced, separated, or single, use information based on the parent who will provide the financial support for your education.*

## SECTION I. Information/Status/Home Data

1. Student's Name: 1. \_\_\_\_\_
2. State of Legal Residence: 2. \_\_\_\_\_
3. Parent(s) marital Status: (S) Single 3. \_\_\_\_\_  
(M) Married
4. Number of Family Members at home: 4. \_\_\_\_\_  
(include student, parent(s), and other dependents)
5. In addition to applicant, how many other family members 5. \_\_\_\_\_  
attending college during current year?

## SECTION II. Parent Income and Expense Information

6. Estimated Adjusted Gross Income (latest return) 6. \_\_\_\_\_
7. Parent(s) Untaxed Income (latest return) 7. \_\_\_\_\_  
(include Soc. Sec. benefits, ADC, Child support, etc.)
8. Medical/Dental Expense Paid in (latest return) 8. \_\_\_\_\_  
(not covered by insurance)
9. K-12 Tuition Paid (latest return) 9. \_\_\_\_\_  
(exclude student applying for scholarship)

## SECTION III. Student Income and Asset Information

10. Estimated Student's Income (latest return) 10. \_\_\_\_\_
11. Student's Untaxed Income (latest return) 11. \_\_\_\_\_
12. Student's Assets and Savings 12. \_\_\_\_\_

**Note: All questions must be answered or N/A indicated for appl. to be considered.**

**SECTION IV. CURRENT PARENT ASSET INFORMATION**

- 13. Parent(s) Cash and Savings 13. \_\_\_\_\_
- 14. Market Value of Home 14. \_\_\_\_\_
- 15. Unpaid Mortgage on the Home 15. \_\_\_\_\_
- 16. Value of other Real Estate/Investments  
(present value of stocks, bonds, CD's, trust, etc.) 16. \_\_\_\_\_
- 17. Debt against Real Estate or Investments 17. \_\_\_\_\_

**CERTIFICATION**

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We certify that to the best of our knowledge, the information contained in this application and financial statement is correct and complete.

Applicant's Signature:

\_\_\_\_\_

Applicant's Name (Typed or Printed)

\_\_\_\_\_

Parent's or Guardian's Signature

\_\_\_\_\_

Parent's or Guardian's Name (Typed or Printed)

\_\_\_\_\_

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

**Please review this application to make sure that all questions have been answered completely and accurately.**

**INCOMPLETE APPLICATIONS WILL BE REJECTED**

Application Deadline Date – **March 1**

Mail completed application and financial statement to:

**Memorial Scholarship  
PO Box 5205  
Lincoln, NE 68505-0205**