



**Past National Commander Michael J. Kogutek Amer.ic m legion Scholarship Trust,**

**Deadline May 2, 2025**

Please submit materials in English

This scholarship is intended to assist New York State Veterans, their families, and patriotic students who share the ideals of the American Legion.

Note: Scholarship applications will be judged on their own merit based on the experience and education level of the individual student/veteran.

## Application Requirements

**High School Students**

1. Submit a copy of your College/University Letter of Acceptance with the scholarship application.
2. Submit an official transcript from your High School.
3. Must attend College/University as a full-time student.

## Veterans

* + Attendance at the College/University as a full-time student is not mandatory.
  + Submit all additional information available, even from High School.

## All Students

* + Submit one completed scholarship application form. The form is available at The Erie County American Legion, 609 City Hall, 65 Niagara Square, Buffalo, N.Y. 14202. Phone number 716-852-6500. Website eriecountyal.org
  + Submit an essay of 500 words or less.
  + Include two letters of recommendation.
  + No more than 15 pages of application materials will be accepted.
  + Incomplete applications will not be considered.
  + All application materials must be submitted by Noon (EST) on May 2, 2025 at the office or postmarked by May 2, 2025. There is a drop box on the office door. Materials arriving after the deadline will not be considered.

## Personal Information

|  |  |  |
| --- | --- | --- |
| Last (Family)Name | First (Given) Name | Middle Name (if any) |
| Mailing Address | City/State | Zip Code |
| Email | Phone Number | Citizenship |

**For Official Use Onl**

App# Date Rec. Ref 1 Rec. Ref 2 Rec. Other Mtls Incomplete

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** |  |  | |  |  | |  | | **Page 2** |
| **Educational Data** | | | | | | | | | |
| Your Current Enrollment: - High School/College/University *(Please include school contact information)* | | | | | | | | | |
| College/University attending Fall 2025 | | | | Start Date | | | | Expected Graduation Date (month & year) | |
| College/University Major | | | | | | | | | |
| What degree are you currently pursuing? (Please place a check in the  aooropriate box) | | Associate  0 | Bachelor  0 | | Master's  0 | | | Doctorate  0 | Other? |
|  | | | | | | | | | |
| College/University you may transfer to in the future to complete your education, if different from above. | | | | | | | | | |
|  | | | | | | | | | |
| **Reference Letters** | | | | | | | | | |
| Two letters of recommendation are required. At least one of the letters should be from a faculty member who is familiar with your educational program. Faculty recommendations must be on institution letterhead. References should comment on your character and potential for leadership and/or for making a significant contribution to your community. This can be based on specific examples drawn from your course work, projects, or activities. Each letter of recommendation must be included and signed. | | | | | | | | | |
| Ref1 Name | | Institution Name | |  |  | |  | |  |
| Dept Name | | Telephone | |  |  | | Email | |  |
| Ref2 Name | | Institution Name | | | | | | | |
| Dept Name | | Telephone | |  |  | | IEmail | |  |
|  | | | | | | | | | |
| **High School/College/University Department Head Endorsement** | | | | | | | | | |
| To the best of my knowledge, I hereby verify that the academic information and summary of school activities as submitted in this application are correct, and the applicant meets the application requirements. | | | | | | | | | |
| Endorser's Name and Title (Please print) | | | | | | Signature and Date | | | |
| Telephone | Email |  | |  |  | Institution Name | | | |
| Mailing Address | | | | | | | | | |

# Name Page 3

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Family Income Information** | | | | | | | | |
| 0 Under  $40,000 | 0 | $50,001-60,000 | 0 | $70,001-80,000 | 0 $90,001-100,000 | 0 | $120,001-130,000 | 0 $150,001-200,000 |
| 0 $40,000  - 50,000 | 0 | $60,001-70,000 | 0 | $80,001-90,000 | 0 $100,001-120,000 | 0 | $130,001-150,000 | 0 Over $200,000 |

1. For financial need purposes, please indicate if there are any special family need considerations. Such as family size, others attending college, etc.
2. How will you use the Past National Commander Michael J. Kogutek American Legion Scholarship Trust if one is awarded to you? (Example: tuition, books, related expenses, or as supplement to other assistance.
3. Highlight Educational Record, Extracurricular Activities, Sports and Community Service.
4. Are you a veteran, or related to a veteran? If you are a veteran, please indicate your branch of service, brief military history, and any membership in veteran's organizations. If you are related to a veteran, please indicate relationship and their military information. Please submit DD-214 if available, blot out any confidential information.

# Name Page 4

1. **Essay Question:** In 500 words or less, describe your proposed course of study. Describe your career objectives and how the award of this American Legion scholarship would help you attain them. Comment on what you have achieved and learned through your studies and activities.

|  |  |
| --- | --- |
| **To be eligible for consideration, all fully completed Scholarship Applications must reach The Erie County American Legion by May 2, 2025, or postmarked by that date.** | |
| **Submit materials to:** | **For More Information contact:** |
| Erie County Committee | Jim Bojanowski Erie County Adjutant |
| Attn: MJK Scholarship Committee | Telephone: 716-852-6500 |
| 609 City Hall | Fax: 716-852-4664 |
| 65 Niagara Square | eriecountyal.org |
| Buffalo, NY 14202 | [veteran14202@verizon.net](mailto:veteran14202@verizon.net) |