



RALPH HOLEWINSKI VFW POST 1518 SCHOLARSHIP APPLICATION

Postmarked by April

The Ralph Holewinski VFW Post 1518 will be awarding four \$1,000.00 scholarships to veteran's children and grandchildren planning to attend an accredited college or university. To qualify, applicants must be a High School senior or an early college 5th year student, live or attend school in Otsego County and have a GPA of 3.0 or higher. Scholarship Awards will be presented at a special dinner, Saturday, April 29, 2023 at the Knights of Columbus (K of C) Hall on 2573 Wilkinson Road, Gaylord, Michigan.

Applicant's Information:

Full Name: _____

Address: _____ City/Zip: _____

Home Telephone: _____ Cell Phone: _____

Email Address _____

Veteran's Service Information:

Veteran's Full Name: _____

Relationship to Applicant: _____ War Period Served: _____

What does your family member's military service mean to you? (State in a few sentences; add additional page if needed.)

Academic Information: (Most recent **transcript must** be submitted with application.)

College/University you plan to attend: _____

Course of Study: _____

Current GPA (Grade Point Average): _____

Verification of GPA by Advisor/Counselor: _____

(Advisor/Counselor Signature Required)

School Name: _____ Telephone Contact: _____

Extra-Curricular & Civic Involvement: (List significant activities, leadership roles and accomplishments; add page if needed.)

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Applicant’s Justification - Please explain in 100 words or less your career goals and intentions for the scholarship award. (Attach an additional page if necessary.)

High School Advisor/Counselor Recommendation – Describe in 100 words or less the applicant’s ability and need; **please sign** the recommendation. (Attach an additional page if necessary.)

(Signature of Advisor/Counselor)

Applicant’s Financial Information:

Parent (s) Most Recent Adjusted Gross Income: \$_____

College Tuition Costs: \$_____ Room & Board: \$_____

List other scholarships, financial aid or grants received:_____

Certification of Information:

I certify, to the best of my ability, that the application information is complete and accurate and that any falsification of information will result in the termination of the scholarship.

Parent’s Signature/Date: _____
(date)

Applicant’s Signature/Date: _____
(date)

Mail completed application with transcript postmarked before midnight April 11, 2023 to:

VFW Post 1518 Scholarship Committee
1905 S. Otsego Avenue, Gaylord, MI 49735
For questions or information, call Scholarship Chair at 517-214-5762