



American Legion Ray A. Master Post 217 2024-2025 Scholarship Application



Ray A Master Post 217
133 Centre Ave, Tipton Pa 19562

The American Legion Ray A Master Post 217 ('Legion') Scholarship is awarded annually to eligible military veterans on the basis of scholastic record (2.5 minimum GPA). Scholarships are formally presented. Scholarship awardees must be present to receive award. Event details will be provided to scholarship recipients.

General Instructions: Complete the application in its entirety and submit the completed application to Kutztown University Financial Aid Services. Incomplete applications will not be considered.

Deadline: September 30, 2024 at 4:30pm

STUDENT INFORMATION *(Please print clearly)*

Student's Full Name: _____
Mr./Miss/Mrs. First Name M.I. Last Name

Address: _____
Street # and Name City State Zip

County of Residence: _____ Student ID #: _____
(Required)

Telephone number: (_____) _____ KU Email: _____
Area Code

Scholarship Criteria:

- Applicant is an honorably discharged Veteran or currently serving member of the U.S. Armed Forces.
- Applicant must be currently enrolled at Kutztown University. Transfer students are eligible to apply.
- Applicant must be working toward first baccalaureate degree.
- Applicant is in good academic standing with cumulative 2.5 GPA.
 - (Transfer students' GPA is based on GPA used for admission to KU).
- Three, \$500 scholarships are awarded annually; one scholarship awarded to a sophomore, junior, and senior.
- Scholarship is applied to student's active account in the spring semester.
- Students can reapply, the scholarship can be re-awarded if the student remains in good academic standing.

SCHOOL INFORMATION *(Please print clearly)*

Undergraduate Part-Time Full-Time Major: _____

SIGNATURE AND DATE *(Required)*

I have read the Legion Scholarship Policies and Procedures and understand the conditions upon which a scholarship is granted. I certify that the above information is correct. The above information is furnished for use by the Legion and the university to which I am applying. I hereby grant permission to the university to release information regarding my academic record to the Legion.

Student Signature

Date

Please email this completed form to [Financial Aid Services](mailto:debucks@kutztown.edu) or debucks@kutztown.edu.
Mail to PO Box 730, Kutztown, PA 19530, or fax to 610-683-1380.