



## AMVETS Post 31

# 2025 Williamson County Scholarship Application

Each scholarship is a \$500 award given to a veteran or the child/grandchild of a veteran. The student OR the veteran sponsor must be a resident of Williamson County. Two scholarships are awarded annually.

### Applicants, please provide these documents in the following order:

- last grade report that shows at least 2.5 cumulative GPA and cumulative attendance at school
  - proof of college/vocational trade school enrollment (or acceptance if a high school student)
  - valid and legible copy of veteran's DD214 with Honorable Discharge
  - copy of state issued ID or driver's license for proof of permanent Williamson County address
  - letters of reference: at least one from your teacher or counselor; you may not use a family member
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- An incomplete application will NOT be processed
  - Any altered or falsified documentation is considered a felony
  - Provide verification of financial need if requested
  - All information will be held in confidence.

**Applications must be turned in by the deadline: February 28, 2025**

PLEASE MAIL PRINTED APPLICATION TO:

Debbie Brooks  
AMVETS Post 31 - 2025 Scholarship  
1101 Horizon Drive  
Marion, Illinois 62959

Questions: [DebbieBrooks001@gmail.com](mailto:DebbieBrooks001@gmail.com)

### Personal Information

Student Name: \_\_\_\_\_

Phone \_\_\_\_\_ email: \_\_\_\_\_

Student Name (pg. 2) \_\_\_\_\_

Are you employed \_\_\_\_\_ if so, where and what is your position: \_\_\_\_\_

\_\_\_\_\_

Extracurricular Activities (groups, athletics, volunteer efforts, etc.) \_\_\_\_\_

\_\_\_\_\_

College or Vocational School that you will be attending \_\_\_\_\_

Cumulative GPA for all high school years (most recent available) \_\_\_\_\_

Parent's or Guardian's Name \_\_\_\_\_

Veteran's Name and Address (if not the applicant) \_\_\_\_\_

--- Living / Deceased \_\_\_\_\_ Relationship \_\_\_\_\_

### Financial Need

Total family income (combined) \_\_\_\_\_/per MONTH

Number of dependents in family \_\_\_\_\_

Number of dependents attending collect this academic year \_\_\_\_\_

Family MONTHLY needs: Mortgage/Rent \$ \_\_\_\_\_ Vehicle payments \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_ Utilities \$ \_\_\_\_\_

Phone/Internet \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

TOTAL for MONTH \$ \_\_\_\_\_ s

Student Name (pg. 3) \_\_\_\_\_

Why do you feel YOU would be a good choice for this scholarship? This is all about YOU; not just about your sponsoring veteran. This is YOUR chance to shine for YOUR accomplishments, goals, vision. (you can attach typed response).

Best wishes as you move into the next wonderful stage of your education !