

**O.L. Arnold D.K. Slayton – American Legion Post 100 – Sparta, WI 54656**  
Student Information Sheet

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Place of employment \_\_\_\_\_ Average # hours/week \_\_\_\_\_

Parent(s)/Guardian (full names) \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name of High School \_\_\_\_\_ Honors and awards \_\_\_\_\_

Community and civic activities \_\_\_\_\_

To what colleges have been accepted? \_\_\_\_\_

What is your intended major? \_\_\_\_\_

SAT/ACT Scores (including dates taken)

English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_

Natural Science \_\_\_\_\_ Composite \_\_\_\_\_

Date taken: \_\_\_\_\_ Class Rank \_\_\_\_\_

If applying under Veteran Preference: Name of Veteran \_\_\_\_\_

Address \_\_\_\_\_

Current American Legion, Auxiliary, and/or S.A.L. number \_\_\_\_\_ Year \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

\*\*\*\*\*Please attach a letter about yourself and a reason for needing this scholarship. **Scholarship application is due to the Student Services Office by 7:40am on Friday, February 23<sup>rd</sup>.**