

Delaware Veterans Post # 2
Scholarship Application

Section I- Personal Data

Name: _____
(Last) (First) (M.I.) (Suffix)

Address: _____

Email _____

Phone # _____

Section II- Family Data

Fathers Name: _____

Current Address: _____

Place and Type of Employment: _____

Mothers Name: _____

Current Address: _____

Place and Type of Employment: _____

Annual Household Income: _____

Information is confidential to scholarship committee use only

Please list siblings and ages:

| | | | |
|-------|------|-------|-----|
| _____ | Name | _____ | Age |
| _____ | Name | _____ | Age |
| _____ | Name | _____ | Age |

How many attending college next year, (including self): _____

Section III- Academics

Name of High School: _____ GPA _____

SAT or ACT Scores: _____
Math Verbal-critical reading Writing Total

_____ Math Verbal- Critical Reading Writing Total

College choices: _____ Accepted?

_____ Yes _____ No _____

_____ Yes _____ No _____

_____ Yes _____ No _____

Major: _____ Minor: _____

If Applicable

List Achievements and Honors: (Attachments OK)

List Community Activities, Extra-curricular Activities and Leadership Positions:

Scholarships awarded to date:

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REQUIREMENTS;

1. Must be a graduating senior from a Kent County High School
2. Must have a minimum “B” academic average
3. Must demonstrate financial need
4. Must be attending an accredited college or university
5. Must include an official transcript
6. Must write a one page essay stating why you are attending the college of your choice and why you need assistance
7. You may use attachments
8. Incomplete, late or inaccurate applications will not be considered

Please mail your application to the following address postmarked no later than March 18, 2022 to:

Delaware Veterans Post # 2
Attn., Scholarship Committee
PO Box 417
Dover, DE 19903-0417