

Vietnam Veterans of America

Chapter 55

Colonel L.J. Hauer Memorial Scholarship

The Vietnam Veterans of America, Chapter 55 will offer a \$5,000 scholarship to a graduating senior from a Licking County High School who has been accepted into a program of continuing education (University, Technical Collage or Trade School). The recipient must be related to a veteran who served during the Vietnam War. (August 5th, 1965 to May 7th 1975) **(The Veteran did not have to serve "in country")** The Applicant will receive \$2,500 for the first Semester/Quarter and the remaining \$2,500 at the beginning of the second Semester/Quarter. Application forms will be available through the school guidance counselor or from the Vietnam Veterans of America, Chapter 55. Completed application forms must be returned to WA Chapter 55 no later than April 10th of the year of senior graduation. Completed packets and the required information can be returned to:

Vietnam Veterans of America Chapter 55

Attn: Scholarship Committee

P.O. Box 624

Newark, Oh. 43058-0624

Information Required:

1. A copy of a letter of acceptance from the organization of further education that the applicant will attend.
2. A letter of recommendation from a teacher, clergy, veteran or other adult member of the community who has had an opportunity to work with and know the applicant.
3. A written or typed statement of no more than 250 words by the applicant stating their goals and their plans to the community and their country.
4. A high school transcript from at least 10th grade through the first half their senior year. Copies of SAT and ACT scores may also be submitted.
5. Information confirming the relationship to the Vietnam Veteran as noted in the opening paragraph.
6. A promise to submit a certificate or transcript from the program attended after completion of the program or the first six months, whichever comes first.
7. An essay about how the Vietnam War affected your relative and America should be submitted to be used as a tie breaker in case of two or more applicants are equally qualified.

For further information please call:

Dan Ohde 740-404-9944

Bud Chase 740-644-1094

Dave Conner 740-644-8595

VIETNAM VETERANS OF AMERICA CHAPTER 55 SCHOLARSHIP APPLICATION

The information requested on this form will help the Scholarship Committee determine your qualifications for this scholarship. Please give complete, accurate answers to all questions. Incomplete applications will not be considered. Applications must be received no later than April 10th. Send all required documents to: VVA Chapter 55, ATTN: Scholarship Committee, P.O. Box 624, Newark OH. 43058-0624.

Name (Last) _____ (First) _____ (Middle Initial) _____
Date of Birth _____

Address _____ City _____ State _____
Zip _____ Phone _____

High School attending or from which you graduated _____
Address _____ City _____ State _____
Zip _____ Phone _____ Graduation Date _____

College applied to / attending _____
Address _____ City _____ State _____
Zip _____ Phone _____

Curriculum Major (if known) _____

List all high school / college activities in which you have participated (attach additional sheet if necessary):

List all community / veteran group organizations / activities in which you have participated:

List special honors / awards you have received while in high school / college:

List part-time/full-time jobs you have held within the past three years:

Do you plan to work while in school? If so, where and how many hours per week (if known):

If you are single, please complete the following: Do you live with a parent?

Father's Occupation _____

Mother's Occupation _____

Number of dependents of your parents: _____

Number of above dependents attending college _____

Veteran Information: Name of Vietnam Veteran _____ (copy of
DD214, if available, to be attached)

Relationship to Applicant _____

I certify that the statements herein are true to the best of my knowledge and grant my permission for
the information contained herein to be shared with the Scholarship Committee and Board.

Applicant's signature _____ Date _____

Parent signature (If student under 18 years of age) _____