THE AMERICAN LEGION
Department of Florida
JROTC CADET OF THE YEAR APPLICATION

ELIGIBILITY:

- Student must be a member of a Florida high school approved JROTC unit.
- The student must be in their ***senior year*** of an accredited Florida high school.
- **Only one student from each high school JROTC unit will be accepted.** *The Senior Military Instructor is responsible for choosing the cadet to receive the application.*

APPLICATION MUST INCLUDE:

- A letter of recommendation from the Commanding Officer of the JROTC unit telling why this cadet should be selected for scholarship over all others.
- A computer generated copy of the cadet's military record must be attached to the application. The record must include Ranks, Jobs, Awards and Events.
- Submissions **must be typed**. You can download the application at floridalegion.org/programs-services/scholarships/ or e-mail the Programs Director at edouglas@floridalegion.org to get a **WORD** document version of the application.

  Deadline for submission: received by **March 1st** of the current school year

<u>Submit Application to:</u>
The American Legion Dept. of Florida
Programs Director
PO Box 547859
Orlando, FL 32854-7859

If you have any questions please contact Programs Director, Elizabeth Douglas, at 800-393-3378 ext. 235 or edouglas@floridalegion.org

Florida American Legion
JROTC CADET OF THE YEAR APPLICATION

DIRECTIONS FOR COMPLETING THIS APPLICATION: **All submissions must be typed**.
Do not attach any documents or additional pages to this application, except as required. All other documents or added pages will be discarded.

Name _____

Address _____

City _____ST _____ Zip _____

Telephone _____

E-Mail Address_____

Parents Names _____

Name of High School you attend _____

Address of School _____

City _____ST _____ Zip _____

Name of JROTC Commanding Officer_____

E-Mail Address _____

School phone # _____ JROTC Ext. _____

Type of JROTC Unit: Army ____ Navy ____ Air Force _____ Marine _____

Number of cadets in unit _____

High School Record: This section to be completed by high school official.
(Can be hand written)

Name of School _____

Cumulative Grade Point Average (GPA) _____ Scale A= _____

Class Rank _____ Expected Date of Graduation _____

SAT Scores Math _____ Verbal _____ Total _____ or ACT Score _____

_____ Date _____
Signature of School Official

_____
Print/Type name and title

Indicate the number of years you have participated in a school and/or community activity during your high school years by placing the number in the blank:

# Years	Activity	# Years	Activity	# Years	Activity	# Years	Activity
	4-H Club		Civil Air Patrol		Gymnastics		Newspaper Staff
	Academic Team		Class Officer		Habitat for Humanity		Nursing Home Volunteer
	Adopt A Highway		Close Up		HOBY Leadership Conference		PEER Leader
	Agronomy-Soils Club		Color Guard		Hockey Field/Ice		PRIDE
	American Legion Auxiliary Jr.		Cross Country		Horizon Club		Prom Committee
	American Red		DARE		Hospital Volunteer		SADD
	Cross Volunteer		Debate/Forensics		Interact		Science Club
	Auxiliary Girls State		DeMolay		Jobs Daughters		Soccer
	Baseball/Softball		Drill Team		Jr. Achievement		Sons of The American Legion
	Boy Scouts or Explorer		Envirothon Team		Jr. ROTC		Spanish Club
	Basketball		Fellowship of Christian Athletes		Key Club		Special Olympics Volunteer
	BETA Club		Football		Latin Club		Student Council
	Big Brothers/Sisters		French Club		Legion Baseball		Swimming/Diving
	Boy Scouts Order of the Arrow		Future Farmers of America		Legion Boys State		TEEN Court
	Boy Scouts Eagle Award		Future Homemakers of America		Leo Club		Tennis
	Boys Club		German Club		Lettermen's Club		Theater
	Business Club		Girl Scout		Magazine Staff		Track
	Campfire		Girl Scout Gold Award		Math Club		Volleyball
	Cheerleader		Girls Club		Model UN		Volunteer Coach
	Church Choir		Golf		Natl. Honor Society		Wrestling
	Church Youth Group						Yearbook Staff

List any offices held and honors and/or awards that you have received in the above activities:

_____

_____

_____

_____

_____

_____

_____

_____

What career do you plan on pursuing when you enter post secondary education?

_____

Why? _____

_____

_____

_____

_____

_____

_____

What institution of higher learning do you want to attend?

_____

Why?_____

_____

_____

Why are you seeking a higher education?

Describe any "community service" activities you have been involved in during your high school career.

CERTIFICATION

If I am selected as a scholarship winner, I give The American Legion Department of Florida permission to use my name and photo in announcing and promoting this scholarship program. I understand that the Department Selection Committee is solely responsible for the selection of the scholarship winners, and its decision is final. I have completed the scholarship application and grant permission to the school of higher education I attend to release information concerning my enrollment status and academic standing to The American Legion Department of Florida for use in administering my scholarship award. In submitting this application, I certify that the information is complete and accurate to the best of my knowledge. Falsification of information will result in termination of this Scholarship.

_____ Date _____

Student Signature

_____ Date _____

Parent/Guardian Signature