



# The American Legion

## Department of Arkansas

702 Victory Street – P.O. Box 3280

Little Rock, Arkansas 72203

[www.arlegion.org](http://www.arlegion.org)

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September 16, 2015

The American Legion, Department of Arkansas, is offering eight (8) scholarships to be awarded in the spring of 2016. Four of the scholarships are from the Coudret Trust Foundation in the amount of \$1,000.00 each and four are from the Garner Trust Foundation in the Amount of \$2,500.00 each. The criteria for the two scholarship programs differ and will be available only to eligible students. Selections are based upon American spirit, character, leadership quality, scholastic endeavor, and basis of need. Below is a list of the qualifications for either scholarship:

1. Must be children, grandchildren, or great-grandchildren of American Legionnaires in good standing of two or more consecutive years membership. Operation Enduring Freedom and Operation Iraqi Freedom Era veterans are exempt from the two-year membership requirement. Children, grandchildren, and great-grandchildren of deceased Legionnaires are also eligible.
2. Applicant or eligible Legionnaire must be a resident of Arkansas.
3. Must have received a high school diploma or the equivalent by the time this scholarship will be awarded or be a graduate of a two-year college from an Arkansas Institution.
4. The Scholarship Application (see attached) must be submitted by the student and endorsed by his or her parent or legal guardian.
5. Applicants must provide: One character reference in business letter format from an official of the student's school, one letter of endorsement from an American Legion officer (local preferred), and one from an unrelated person belonging to none of the above.
6. A certified copy of the student's transcript.
7. A declaration of support for the Preamble to the Constitution of The American Legion, as printed on the application.
8. A Drug-Free Pledge is required as printed on the application.
9. One photograph (approx 3x5) and written authorization to use it. The photograph will be used for press releases.
10. On a separate sheet of paper, using an essay format, provide a brief autobiography, career goals, and why you are the most qualified to receive this scholarship.

The **\$1,000.00 Coudret Trust Scholarship** is available to students who choose to attend an Arkansas or out of state institution of higher learning.

The **\$2,500.00 Garner Trust Scholarship** is available to students that will attend an Arkansas college, university, or technical/trade school. It will not be transferable to an out of state institution of higher learning.

Both scholarships are a one-time award and are not renewable. Students may apply for either or both of scholarships; however, only one scholarship will be awarded per applicant.

**The completed application and accompanying documents must be received at Department Headquarters on or before March 14, 2016.**

**AMERICAN LEGION DEPARTMENT OF ARKANSAS**  
**GARNER TRUST SCHOLARSHIP and COUDRET TRUST SCHOLARSHIP**  
**APPLICATION**

**MUST BE RECEIVED AT DEPARTMENT ON OR BEFORE MARCH 14, 2016.**  
**APPLICANTS WILL BE NOTIFIED IF CHOSEN AS WINNERS.**

Note: Students may apply for either or both scholarships; however, only one scholarship will be awarded per recipient.

- I am applying for the Coudret Trust \$1,000.00 in-state or out of state tuition scholarship
- I am applying for the Garner Trust \$2,500.00 State of Arkansas tuition only scholarship
- I am applying for either scholarship and understand the eligibility criteria for both

Full name \_\_\_\_\_ Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship to Legion Member \_\_\_\_\_ Name of Member \_\_\_\_\_ Post No. \_\_\_\_\_

Membership Number \_\_\_\_\_ Department Member of (state) \_\_\_\_\_ No. of Years Membership \_\_\_\_\_

No. of Family members under 18 \_\_\_\_\_ Family total taxable income \_\_\_\_\_ Eligible for State/Federal Grants \_\_\_ yes. \_\_\_ no

Name of High School Attending \_\_\_\_\_ How long attended \_\_\_\_\_

Mailing Address of School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Other Scholarships applied for and amount \_\_\_\_\_

Other Scholarships received and amount \_\_\_\_\_

School activities and offices held \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Special Honors or Awards Received \_\_\_\_\_

**I pledge to lead a drug-free life, I want to be healthy and happy, I will say no to harmful drugs, I will help my friends say no. I pledge to stand up for what I know is right.**

**Preamble to the Constitution of The American Legion:** For God and Country, we associate ourselves together for the following purposes: To uphold and defend the Constitution of the United States of America; to maintain law and order; to foster and perpetuate a one hundred percent Americanism; to preserve the memories and incidents of our association in the Great Wars; to inculcate a sense of individual obligation to the community, state and nation; to combat the autocracy of both the classes and the masses; to make right the master of might; to promote peace and good will on earth; to safeguard and transmit to posterity the principles of justice, freedom, and democracy; to consecrate and sanctify our comradeship by our devotion to mutual helpfulness.

**I support the Above Preamble and Drug Free Pledge**

**I give permission to use/publish my child's photograph**

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

\_\_\_\_\_  
**Signature of Parent or Legal Guardian**

**THE SELECTION COMMITTEE RESERVES THE RIGHT TO REFUSE ANY APPLICATION**

Please Note: Distribution of scholarship funds are made upon confirmation of the student's registration at a post-secondary education institution. Mail completed application to:

American Legion Department of Arkansas  
P.O. Box 3280  
Little Rock, Arkansas 72203  
Phone: 1-501-375-1104