

STUDENT EDUCATIONAL INFORMATION

High School _____ () _____
Phone with area code

Address _____

City _____ State _____ Zip Code _____

Graduation date _____ Grade Point average _____

Class rank _____ Number in class _____

List honors and distinctions:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

COLLEGE/UNIVERSITY

College you attend or plan on attending _____ Phone with area code _____

Address _____

City _____ State _____ Zip Code _____

Grade Point average – most recent transcript _____

VETERAN INFORMATION

I am eligible for the LEE AND JIM TRESSEL SCHOLARSHIP due to honorable service in the Armed Forces of the UNITED STATES OF AMERICA by the following family member(s):

Myself Father Mother Grandfather Grandmother Spouse (check all applicable)

Name of veteran you are applying under _____ Phone with area code _____

Address _____

City _____ State _____ Zip Code _____

Is the above listed veteran disabled? Yes No

STUDENT FINANCIAL STATEMENT

If yes, list percentage of disability _____%
 List any grants or scholarships you will receive and their value:

1. _____ 2. _____
 3. _____ 4. _____

1. Total monetary value of all scholarships and grants 1. \$ _____
 2. Amount of financial aid you will receive from your family 2. \$ _____
 3. Amount you have saved for your education 3. \$ _____
 4. Total of any other financial support you will receive 4. \$ _____
 5. Total FINANCIAL SUPPORT available (add lines 1 thru 4) 5. \$ _____
 6. Are you, as a student, listed as a dependent on your
 parents' income tax return? 6. Yes No
 7. List the name of your or your spouse's employer 7. _____
 8. List your adjusted gross income from your most recent
 federal income tax return 8. \$ _____
 8a. If married and filing separately, list your spouse's
 adjusted gross income 8a. \$ _____

If you answered **yes** to line 6 above or if line 2 above was greater than \$0, this section must be completed.

PARENTAL FINANCIAL STATEMENT

 Father's name Marital status Phone with area code

 Address

 City State Zip Code

 Mother's name Marital status Phone with area code

 Address (put "same" if parents live in same household)

 City State Zip Code

List your parents' adjusted income from their most recent
 joint federal income tax return \$ _____

List adjusted gross incomes, if parents file separately (F) \$ _____ (M) \$ _____

1. Is anyone in your immediate family, other than the applicant,
 attending an accredited college or university? Yes No
 2. If you answered **yes** to the above question, please continue with the following questions, which pertain to
 those students in your immediate family other than the applicant:
 A. How many individuals in your immediate family are attending an
 accredited college or university? _____
 B. Is (are) the student(s) in your immediate family receiving an AMVETS scholarship?
 Yes No
 C. Is (are) the student(s) receiving any financial aid? Yes No
 D. What is the total amount of financial aid? _____

VARSITY HIGH SCHOOL SPORTS INFORMATION

I have participated in the following Varsity High School Sports:

Check all that apply

- | | | | | |
|--|---------------------------------|-------------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> Football | <input type="checkbox"/> Soccer | <input type="checkbox"/> Baseball | <input type="checkbox"/> Softball | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Diving | <input type="checkbox"/> Basketball | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Lacrosse |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Rugby | <input type="checkbox"/> Hockey | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Drill Team |
| <input type="checkbox"/> Marching Band | <input type="checkbox"/> Track | <input type="checkbox"/> Skiing | <input type="checkbox"/> Tennis | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Other (please list) _____ | | | | |

List any special sporting awards or distinctions:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |

Please explain any other special achievements in sports:

Please be sure to include documentation of participation in sports and sporting achievements or accolades.

SELECTIVE SERVICE: (Male only)

All 18 year old males are mandated by law to register with the Selective Service System. I *have* *have not* complied with this law (if under 18 at time of application is submitted.) However, I will register _____(enter date) and submit verification of same at the time to the AMVETS Department of Ohio.

PUBLICITY RELEASE

For publicity reasons, and only after the selection of the recipients is made, I hereby authorize the AMVETS Department of Ohio, its agents and representatives to use my name and picture in regard to publications relative to the Lee and Jim Tressel Scholarship.

Date

Applicant's signature

COMPLETE ALL QUESTIONS AND RETURN TO THE ADDRESS BELOW. DON'T FORGET TO ENCLOSE:

- Sponsoring veteran's DD214 or discharge
- Grade transcript(s)
- Picture (good quality black and white or color)
- Autobiographical statement
- Documentation of participation in sports

PUT PROPER POSTAGE ON ENVELOPE AND MAKE SURE ADDRESS BELOW IS CLEARLY VISIBLE THROUGH THE WINDOW.

SUBMIT TO: AMVETS Department of Ohio
1395 E. Dublin Granville Rd. STE 222
Columbus, OH 43229-3314

**AMVETS DEPT OF OHIO
1395 E DUBLIN GRANVILLE RD STE 222
COLUMBUS, OH 43229-3314**