Application Guidelines

1. Up to four scholarships not to exceed $500.00 each will be awarded, as funds are available. At least one scholarship will be awarded from each of the four American Legion Department Membership Areas, as funds are available. Only one candidate will be allowed from each Senior American Legion Baseball Team. Scholarships are awarded for one year only and are nonrenewable.

2. Eligibility is open to Nebraska American Legion Baseball players in their last year of Legion Baseball eligibility and/or graduating senior.

3. Selection of recipients will be made based on the following:
   a. ALL questions answered or N/A indicated
   b. Financial need
   c. Academic achievement
   d. School and community involvement

4. An impartial award selection committee will evaluate applications and select recipients.

5. Student must attend a post-secondary educational institution within the state of Nebraska, and must have maintained a grade point average (GPA) in the upper 50 percent of his/her graduating class.

6. Scholarships must be used at the beginning of the academic year immediately following notification of awards. Use cannot be delayed nor can awards be held for future use or transferred to other individuals. In cases of unusual circumstances or emergencies, recipients may appeal to request delays in the use of awards. The Department Scholarship Committee will evaluate such requests.

7. Scholarship stipends will be sent to the institution of the recipient’s attendance to be held for use in their name for tuition and fees, books, room and board only. Should the recipient drop out of school, any unused money must be returned to the Department of Nebraska, The American Legion.
Information and Instructions for Applicants

1. Completed application and required certifications must be enclosed in the same envelope and postmarked on or before the application deadline date of **JUNE 15, 2019**.

2. Scholarship application must be complete when received. The following are required in order to receive consideration:
   a. Copy of completed Scholarship Application
   b. Copy of completed Financial Statement
   c. Certification blocks must be signed by school official, applicant and parent or guardian.
   d. Three Letters of recommendation.

3. Mail completed application, attachments and financial statement to:

   JIM HURLBERT MEMORIAL SCHOLARSHIP
   PO BOX 5205
   LINCOLN NE  68505-0205

   NOTE: Application materials cannot be returned. All applications will be shred after judging is completed.

4. **Incomplete applications will not receive consideration.** The sponsors and American Legion personnel are not responsible for acquiring any data or forms for applicants. **Do not include materials not specifically requested**, such as folders, a resume, and pictures. **There are no provisions for eligibility criteria waivers.**

5. Scholarship winners will be notified via first class mail by August 1, 2019.

Application deadline is **JUNE 15, 2019**
2019 JIM HURLBERT MEMORIAL
BASEBALL SCHOLARSHIP APPLICATION

Please type application or print in black ink.

1.____________________________________________________________________
   Full Legal Name: Last, First and Middle

2.___________________________________________________________________
   Permanent Home Address: Number, Street, City, State, Zip

3._________________________   4. (________)___________________
   Date of Birth                        Telephone Number

5._____________________________________________________________________
   Sponsoring American Legion Post

Section A - High School Record

Year in School:__________   Name and Location of High School:___________________________

Grade Point Average:__________ In Upper ___________% of Class.

On one additional page (8 1/2 X 11 inches) list activities participated in during high school and also list awards, honors and recognition received.

Section B - Community Participation Record

On one additional page (8 1/2 X 11 inches) list community organizations in which you have held membership excluding high school. Additionally, list other activities that you were involved with that directly or indirectly improved life in your community.

Section C - Career Interests

On one additional page (8 1/2 X 11 inches) describe your career interests and/or goals. The selection committee realizes that in many cases, applicants will not have decided on career goals, however, complete this section to the best of your ability.

Section D - Letters of Recommendation and Testimony

One letter each from your school, your community and a representative from your American Legion Baseball Program.

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Section E - Essay

Please indicate in a 50 word or less essay what American Legion Baseball has meant to you and how you have benefited from it.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Section F - American Legion Baseball Involvement

Junior Baseball
Years of participation - Sponsoring American Legion Post

Senior Baseball
Years of participation - Sponsoring American Legion Post

Endorsement of Team Manager/Coach

Authorized Signature
FINANCIAL STATEMENT

Student’s Name ____________________________________________

Current Address ______________________________________________

City/State/Zip Code _______________________________________________

Please complete this entire section as accurately as possible. NOTE: If your parents are divorced, separated or single, use information based on the parent who will provide the financial support for your education.

Section I. Information/Status/Home Data

1. Student’s Name

2. State of Legal Residence

3. Parent(s) Marital Status: Single(S) Married(M)

4. Number of Family Members at Home
   (include student, parent(s), and other dependents)

5. In addition to applicant, how many other family members will be attending college during 2019-20?

Section II. Parent Income and Expense Information

6. Estimated Adjusted Gross Income 2018

7. Parent(s) Untaxed Income 2018 (include Social Security benefits, ADC, child support, etc.)

8. Medical/Dental Expense Paid in 2018 (not covered by insurance)

9. K-12 Tuition Paid 2018 (exclude student applying for scholarship)

Section III. Student Income and Asset Information

10. Estimated Student’s Income 2018

11. Student’s Untaxed Income 2018

12. Student’s Assets and Savings

NOTE: All questions must be answered or N/A indicated for application to be considered

( over )

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Section IV. Current Parent Asset Information

13. Parent(s) Cash and Savings

14. Market Value of Home

15. Unpaid Mortgage on the Home

16. Value of other Real Estate/Investments
   (present value of stocks, bonds, CD’s, trust, etc.)

17. Debt Against Real Estate or Investments

CERTIFICATION

We certify that to the best of our knowledge, the information contained in this application and financial statement is correct and complete.

Applicant’s Signature:

Applicant’s Name (typed or printed):

Parent’s or Guardian’s Signature:

Parent’s or Guardian’s Name (typed or printed):

Date: _______________________

PLEASE REVIEW THIS APPLICATION TO MAKE SURE THAT ALL QUESTIONS HAVE BEEN ANSWERED COMPLETELY AND ACCURATELY.

INCOMPLETE APPLICATIONS WILL BE REJECTED.

Application Deadline Date – June 15, 2019

Mail completed application, attachments & financial statement to:

JIM HURLBERT MEMORIAL SCHOLARSHIP
PO BOX 5205
LINCOLN, NE 68505-0205

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SCHOOL CERTIFICATION

HIGH SCHOOL RECORD - This section is to be completed by high school official.

Cumulative Grade Point Average (GPA) based on the scale of A = 4.0, as of completion of 2018-19 school year or graduation: ____________

Expected Date of Graduation: ________________________________

____________________________________________
Name of high school

____________________________________________
Print/Type name of school official and title

(Affix School Seal or)
(Official Rubber Stamp here)
REQUiRED

____________________________________________
Signature of School Official

____________________________________________
Date

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