



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 **Senior Military Instructor** 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

DEADLINE: All applications must be **received by March 1st** of the current school year. ****Any applications received after March 1, will NOT be accepted****

SUBMIT APPLICATION TO:

The American Legion Dept. of Florida:
PO Box 547859 Orlando, FL 32854-7859 Attn: Scholarships

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



Florida American Legion JROTC CADET OF THE YEAR APPLICATION

DIRECTIONS FOR COMPLETING THIS APPLICATION: **All submissions must be typed.**
Please attach the letter of recommendation from your Senior Military Instructor and your cadet military record to the back of this application.

Cadet Information:

FULL NAME:

MAILING ADDRESS:

CITY: STATE: Florida ZIP CODE:

TELEPHONE:

E-MAIL ADDRESS:

PARENTS/GUARDIANS NAMES:

Senior Military Instructor Information:

RANK AND NAME:

E-MAIL ADDRESS:

SCHOOL TELEPHONE: JROTC EXT:

TYPE OF JROTC UNIT:

NUMBER OF CADETS IN UNIT:

High School Record: This section to be completed by high school official.

(Can be hand written)

HIGH SCHOOL: _____

UNWEIGHTED GPA: _____ WEIGHTED GPA: _____

CLASS RANK: _____ EXPECTED DATE OF GRADUATION: _____

SAT SCORE: _____ ACT SCORE: _____

Signature of School Official: _____ Date: _____

Print/Type name and title

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.

Student Signature

Date _____

Parent/Guardian Signature

Date _____

CLUBS/ ACTIVITIES:

Please list all clubs and activities you have participated in at school and/ or in your community. Make sure to list the number of years you have been involved in each club/ activity.

(Example: Band – 4 years, Cross Country – 2 years):

OFFICES/ HONORS/ AWARDS:

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

APPLICATION QUESTIONS:

**1) WHAT CAREER DO YOU PLAN ON PURSUING WHEN YOU ENTER
POST-SECONDARY EDUCATION? WHY?**

**2) HOW WILL YOUR AREA OF STUDY CONTRIBUTE TO YOUR
IMMEDIATE OR LONG-RANGE CAREER PLANS?**

3) EXPLAIN THE IMPORTANCE OF YOUR MAJOR IN TODAY'S SOCIETY.

4) DESCRIBE ANY "COMMUNITY SERVICE" ACTIVITIES YOU HAVE BEEN INVOLVED IN DURING YOUR HIGH SCHOOL CAREER.

5) WHAT DO YOU CONSIDER TO BE THE SINGLE MOST IMPORTANT SOCIETAL PROBLEM? WHY?

6) PICK AN EXPERIENCE FROM YOUR OWN LIFE AND EXPLAIN HOW IT HAS INFLUENCED YOUR DEVELOPMENT.
