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 programs@floridalegion.org to get a WORD document version of the application.

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

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

If you have any questions, please contact Programs Director Bekki Tibbs 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.**
*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/Guardians 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 handwritten)*
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:

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