2024
THE DEPARTMENT OF IDAHO AMERICAN LEGION
GREG and BETH GARATEA ENDOWMENT
SCHOLARSHIP PROGRAM

Mission
To provide educational assistance to Veterans and the children of Idaho Veterans in the pursuit of an education and/or trade school regardless of age.

1. The THE AMERICAN LEGION DEPARTMENT OF IDAHO AMERICAN LEGION GREG and BETH GARATEA ENDOWMENT Scholarship program
   Only applicants of current paid up American Legion members and/or American Legion, Auxiliary members, and Sons of the American Legion who have been active members in the Department of Idaho American Legion and/or Auxiliary for a period of two (2) years may apply for a scholarship. Exceptions will be referred to THE AMERICAN LEGION DEPARTMENT OF IDAHO GREG and BETH GARATEA ENDOWMENT Scholarship Committee.

2. Scholarships will be awarded only to students who desire to advance in their education or trade in an accepted institution.

3. THE DEPARTMENT OF IDAHO AMERICAN LEGION GREG and BETH GARATEA ENDOWMENT Scholarship Committee will determine monetary value of scholarships and the number of scholarships released.

4. Consideration will be given to the applicant’s needs in determining recipients of THE AMERICAN LEGION DEPARTMENT OF IDAHO GREG and BETH GARATEA ENDOWMENT Scholarships.

5. All scholarships will be awarded based on applicant’s desires and aspirations for becoming a more productive citizen. With preference given to in order of preference.
   a. American Legion Family Membership.
   b. Veteran
   c. Children of a Deceased Idaho Veteran
   d. Children of a Disabled Idaho Veteran
   e. Children of a Idaho Veteran

6. All scholarship funds will be released to the recipient’s school of choice. Endorsement of said check will be by both parties (educational institution and recipient). Should recipient exit the institution at anytime, any fund balance must be returned to THE AMERICAN LEGION DEPARTMENT OF IDAHO GREG and BETH GARATEA ENDOWMENT Scholarship Fund.

7. The purpose of this Scholarship Program is to escalate the image of the youth of America.

8. Only applicants who are enrolled in school this current year will be considered for scholarships.
PART ONE: Personal Information (please print or type)

1. Name of Applicant __________________________
   Address __________________________________________
   Street or Box Number                     City                  State                Zip
   Social Security Number __________________________
   Date of Birth ___________________         Phone _____________________

2. Name of Father _____________________  Address ______________________
   Living ______   Deceased ______
   Single _____   Married ______

3. Name of Mother ____________________  Address ______________________
   Living ______   Deceased ______
   Single _____   Married ______

4. Eligibility for Scholarship: Father     Mother     Grandparent (Circle One)
   Current membership ID # ___________________ Post/Unit Number _____

5. Name/Branch of Parent/Grandparent’s Service __________________________

6. Occupation of Father, step-parent, guardian __________________________
   Occupation of Mother, step-parent, guardian __________________________

7. Do parent/children receive government compensation/pension: ( Y or N )

8. What other scholarships or monetary awards have you been granted?
   ___________________________________________________________________
   ___________________________________________________________________
   Please indicate total dollar amount awarded ______________________________

9. The educational institution you desire to attend, _________________________
   What course of study do you plan to pursue? __________________________

10. Please list educational goals _________________________________________
    __________________________________________________________________
PART TWO: Activities

1. Participation in extra-curricular activities ________________________________

2. Offices held in class or school organizations ______________________________

3. Community involvement, offices held, awards, etc., and work experience

PART THREE on a separate piece of paper please explain how this Scholarship could change your life and aspirations.

_____________________________ ________________________________
Signature Date

PART THREE: Supporting documentation

The following items must be included with the application:

   a) Educational aims
   b) Chosen career
   c) Plans for accomplishment
   d) Expectations of the duration for chosen course of study
   e) Financial needs
   f) Percentage of your personal contribution toward your educational expenses
   g) Percentage of parents contribution for your first year of school
   h) Certified High School transcript and/or GED equivalency

RETURN COMPLETED APPLICATION BY JUNE 1, 2024

The American Legion
Department of Idaho
901 W. Warren Street
Boise, ID  83706-3825

Attn: American Legion Idaho Scholarship Committee