



**ROCHELLE PARK AMERICAN LEGION POST 170
33 WEST PASSAIC STREET
ROCHELLE PARK, N.J. 07662**

<https://alpost170.us/scholarships/>

American Legion Post 170 Family Scholarship-2025 Application

**1-1 Year American Legion Post 170 Scholarship, \$1000
1-1 Year "Napoleon Bonaparte" Scholarship, \$1000
1-1 Year "Edward O'Dowd" Scholarship \$500
1-1 Year Sons of American Legion Scholarship, \$500
1-1 Year Auxiliary Scholarship, \$500
1-1 Year Riders Scholarship, \$500**

REQUIREMENTS:

- 1. Must be either a resident of Rochelle Park or a direct descendent of a member of American Legion Post 170, Unit 170, SAL 170, or Riders 170.**
- 2. Must be a senior in high school planning to attend an institution of higher learning.**
- 3. Letter(s) of Recommendation (examples: from teacher, religious leader, principal, etc.) must accompany application.**
- 4. Essay of 500 words on: "Why I Want To Further My Education" must accompany the completed application.**
- 5. A transcript of grades must accompany the completed application.**

Applications are awarded points as follows:

**30 points Composition
20 points Community Activities
20 points School Activities
10 points Letter(s) of Recommendation
10 points GPA
5 points Relative of Post 170 Member
5 points Post 170 Member for two years or more**

Any questions, please contact Roberta O'Dowd at 201-913-0437

All items must be submitted with completed applications no later than May 15th to:

**Post 170 Family Scholarship
American Legion Post 170
33 West Passaic Street
Rochelle Park, New Jersey 07662
Attn: Roberta O'Dowd**

**ROCHELLE PARK AMERICAN LEGION POST 170
33 WEST PASSAIC STREET
ROCHELLE PARK, N.J. 07662**

<https://alpost170.us/scholarships/>

Post 170 Family Scholarship

PLEASE READ THE SEPARATE LIST OF REQUIREMENTS AND FOLLOW THE INSTRUCTIONS. ALL DOCUMENTS MUST BE RECEIVED TOGETHER NO LATER THAN MAY 15TH.

NAME OF APPLICANT: _____ **DATE OF BIRTH:** _____

ADDRESS: _____

HOME PHONE #: _____ **MOBILE #** _____ **EMAIL** _____

SCHOOLS ATTENDED:

ELEMENTARY _____ **DATE GRADUATED** _____

JUNIOR HIGH _____ **DATE GRADUATED** _____

HIGH SCHOOL _____ **DATE GRADUATED** _____

LIST COMMUNITY AND SCHOOL ACTIVITIES (SEPARATELY).

FATHER'S FULL NAME _____ **LIVING: YES** ___ **NO** ___

MOTHER'S FULL NAME _____ **LIVING: YES** ___ **NO** ___

ARE YOU A RELATIVE OF POST 170 MEMBER: YES ___ **NO** ___ **RELATIVE'S NAME** _____

IS APPLICANT A POST 170 MEMBER: YES ___ **HOW MANY YEARS** ___; **MEMBERSHIP NUMBER** _____

NAME OF COLLEGE, UNIVERSITY OR INSTITUTION YOU ARE APPLYING TO:

HAS YOUR APPLICATION BEEN SUBMITTED? _____ **ACCEPTED?** _____

STUDENT SIGNATURE: _____ **DATE:** _____

[illegible][illegible]

