

2025-2026 MEDICAL SCHOLARSHIP APPLICATION REQUIREMENTS

Selection of scholarship award recipients shall be based on meeting the outlined criteria, applicant's narrative and references, character, and educational goals.

- Applicant must be a child, grandchild, or great-grandchild of a veteran of the United States Armed Forces. Neither veteran nor applicant are required to be a member of the American Legion Family.
- Applicant must be a high school graduate or current 2025-2026 Senior high school student (may be currently enrolled in college courses).
- Applicant must be a resident of Texas, applying to an Institute of Higher Learning in Texas with course of study in the fields of medicine including but not limited to medical doctor, nurse, pharmacology, veterinarian services, mental health, dental services, etc.
- Applicant must be enrolled in said Institute of Higher Learning no later than August 1, 2026. Payment is made directly to the school - if a student fails to attend, a refund will be requested from the school. Scholarships will not be awarded for the 2026-2027 school year.
- Applications must be received by the Past Presidents Parley Committee Chair **no later than Memorial Day, May 26, 2026** accompanied by the following documentation:
 - o Completed application signed by an American Legion Auxiliary Unit of the Dept of Texas
 - o Personal letter from applicant not to exceed 500 words stating qualifications, goals, pursuits, etc.
 - o Three (3) original personal and/or professional letters of recommendation written within ninety (90) days of submission (date must be included in letter).
 - o Copy of DD214 determining service of Veteran referenced in application.
 - o Copy of high school or college transcripts

APPLICATION MUST BE RECEIVED BY MAY 26, 2026 TO:

*Past President's Parley Chair, Shay Kuehner
9608 Westpark Drive, Benbrook 76126
Or by email to Shay1956@sbcglobal.net*

Final determinations shall be vested in the Past President's Parley Committee by thirty (30) days prior to the annual state convention. In the event there are more applications than available funds, award will be determined by the order in which the eligible applications were received. Checks will be mailed to the college or university the applicant will be attending no later than August 15, 2026. If the applicant decides against attending, all funds must be returned to the American Legion Auxiliary Department of Texas.

**AMERICAN LEGION AUXILIARY
DEPARTMENT OF TEXAS
PAST PRESIDENT'S PARLEY MEDICAL SCHOLARSHIP APPLICATION**

Applicant Information

Full Name: _____

Mailing Address: _____

City/State/Zip: _____ Telephone #: _____

Date of Birth: _____ Social Security #: _____

Applicant's Major: _____ Student Account # (if applicable) _____

Has applicant received a medical scholarship from the Past President's Parley in the past?

No Yes If yes, what year? _____

Applicant Employment (if applicable - if not, enter "NA")

Occupation: _____ Monthly Income: _____

Application for Scholarship eligibility based on the Military Service of (circle one):

Father Mother Self Grandparent Great-Grandparent

Name of Veteran (if other than self) _____

Date of Birth _____ Living Deceased If deceased, date of death _____

Date entered Active Service: _____ Discharge Date: _____

Type of Separation or Discharge: _____

Date of Birth: _____ If Deceased, Date of Death: _____

Applicant Family / Marital Status

Is Applicant currently living at home with parent(s) or guardian(s)? Yes No

If yes.....

Name of Father: _____ Occupation & Monthly Income: _____

Name of Mother: _____ Occupation & Monthly Income: _____

Household Income (other than parent earnings): \$ _____

Applicant Marital Status Married Divorced Widowed Single

Name of Spouse: _____

Address: _____

Occupation & Monthly Income (if applicable) _____

If spouse is deceased, indicate date of death: _____

If spouse is a veteran, indicate dates of service: _____ through _____

Number of children in household/family: Under 18 years of age _____ Over 18 years _____

Number of dependents in home other than immediate family: _____

Number of children currently attending college or university other than applicant: _____

Applicant Education Date of High School Graduation _____ GPA (last 4 years) _____
Name and location of High School _____

Name and location (exact mailing address) of college or university applicant plans to attend or is currently attending _____

College grade average last grading term: _____

Describe additional sources of financial support that will be utilized for applicant's educational pursuit (grants, student aid, other scholarships, etc) _____

Applicant's Signature _____ Date _____

If awarded Scholarship from the ALA Past President's Parley, student must be enrolled no later than August 1, 2026. Scholarships will NOT be awarded for the 2027-2028 school year enrollment. If student is enrolled and decides not to attend the Fall Semester, the scholarship will be null and void, non-replaceable, and subject to refund if payment already submitted.

Please ensure that all required documentation is attached to this application and submit to an American Legion Auxiliary Unit in or near your community for Unit Sponsorship/authorized signature and submission to the Department of Texas. Applicants should not submit application directly to the Past President's Parley.

UNIT SPONSORSHIP / SIGNATURES - to be completed by American Legion Auxiliary Unit President or Unit Scholarship Chair. Completed packet must be sent to the address below NO LATER THAN MAY 26, 2026.

Name of Unit: _____ Unit #: _____ District: _____

Mailing Address: _____

Unit Recommendations/Comments: _____

Mail application packet to: Shay Kuehner, Past President's Parley Chair
9608 Westpark Drive, Benbrook, Texas 76126 or by email to Shay1956@sbcglobal.net