

# The 109<sup>th</sup> INFANTRY REGIMENT ASSOCIATION LEGACY SCHOLARSHIP



## Application Checklist (Rev: 2020 Application)

Date: \_\_\_\_\_

Name: \_\_\_\_\_

High School: \_\_\_\_\_

Complete and Check:

\_\_\_\_\_ My application is for One (1) school

\_\_\_\_\_ Acceptance letter enclosed

\_\_\_\_\_ Financial award letter enclosed

\_\_\_\_\_ My application is for multiple schools

\_\_\_\_\_ Number of school acceptance letters

\_\_\_\_\_ Number of financial award letters

I have enclosed the following:

\_\_\_\_\_ Letter of recommendation (2)

\_\_\_\_\_ Completed 109<sup>th</sup> Infantry Regiment Association Legacy Scholarship Application

Do not attach any documents or additional pages except as required. Review your application completely. If you cannot answer a question, put a reason in the field. Have someone proof read your application. **Note: Incomplete applications will not be considered.** Each application is judged on its own merit so include any information that makes you exceptional. Keep a copy of everything you submit. Finally pay attention to the deadline date. **Applications must be mailed with a postmark no later than indicated below.** Applications past the deadline date will not be considered.

**Note: Please download the most current application at [www.109thinfantry.org](http://www.109thinfantry.org) found listed under the Documents Tab. Mail application to: Mr. Ron Barkofsky 27 Circle Drive, EYNON, PA 18403.**

**APPLICATIONS MUST BE POST MARKED NO LATER THAN: APRIL 15**

**109<sup>th</sup> INFANTRY REGIMENT ASSOCIATION LEGACY SCHOLARSHIP APPLICATION**  
**Rev: 2020 Application**

**ELIGIBILITY:** Child/children/grandchild or legally adopted child/children/grandchild of a spouse by a prior marriage or dependent child as defined by the United States Armed Services for active duty personnel of the United States military and those guardsmen who are present or past members of the 109<sup>th</sup> INFANTRY BATTALIONS or 55 BDE as it draws lineage from the 109<sup>th</sup> Regiment. **Only high school seniors are eligible to apply for this scholarship.** Please download the most current application at [www.109thinfantry.org](http://www.109thinfantry.org) found listed under the Documents Tab. Mail application to: Mr. Ron Barkofsky 27 Circle Drive, EYNON, PA 18403. PLEASE TYPE OR PRINT LEGIBLY.

**High School Guidance Counselor Name and Direct Contact Email (REQUIRED):**

Name: \_\_\_\_\_ email: \_\_\_\_\_

**High School Guidance Counselor Direct Contact Phone and Extension (REQUIRED):**

Area Code \_\_\_\_\_ Number \_\_\_\_\_ Extension: \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ EMAIL \_\_\_\_\_

DATE OF BIRTH MONTH \_\_\_\_\_ DAY \_\_\_\_\_ YEAR \_\_\_\_\_

**I AM A CHILD/STEPCHILD/RELATIVE OF 109TH MEMBER**

NAME \_\_\_\_\_

RANK \_\_\_\_\_ UNIT \_\_\_\_\_ DATES OF ENLISTMENT \_\_\_\_\_

**ACADEMIC RECORD** *This section is to be completed by a high school official. (Affix school stamp or seal on this page.)*

Name of HS \_\_\_\_\_ HS Enrollment \_\_\_\_\_

Number of students in applicant's class \_\_\_\_\_ Cumulative GPA \_\_\_\_\_ Class Rank \_\_\_\_\_

HS Graduation Date \_\_\_\_\_ SAT Score Math \_\_\_\_\_ Verbal \_\_\_\_\_

Written \_\_\_\_\_ Total \_\_\_\_\_ and/or ACT score \_\_\_\_\_

Name Print \_\_\_\_\_ Signature \_\_\_\_\_

**\* In no less than 500 words, describe activities that would provide examples of leadership skills/abilities. Note: \* Affix separate pages as necessary.**

**\* In no less than 250 words, how did the veteran you are related to impact your life? \* Use additional sheet if necessary.**

## CERTIFICATION

If I am selected as a scholarship recipient and in consideration thereof, I understand, agree and hereby grant permission to the 109<sup>th</sup> Infantry Regiment Association to use my likeness and name in announcing and promoting this scholarship program. I understand and agree that the 109<sup>th</sup> Infantry Regiment Association Legacy Scholarship Committee is solely responsible for the selection of the scholarship recipients and its decision is final. I have completed the scholarship application and have attached the required documents. I grant permission to the school of higher education I attend to release information concerning my enrollment status, academic standing and financial need to the 109<sup>th</sup> Infantry Regiment Association 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. I understand and agree that, falsification of information will result in termination of the 109<sup>th</sup> Infantry Regiment Association Legacy Scholarship.

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Student's Signature

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Date

If my child is selected as a scholarship recipient and in consideration thereof, we understand, agree and hereby grant permission to the 109<sup>th</sup> Infantry Regiment Association to use my child's likeness and name in announcing and promoting this scholarship program. I understand and agree that the 109<sup>th</sup> Infantry Regiment Association Scholarship Committee is solely responsible for the selection of the scholarship recipients and its decision is final. My child has completed the scholarship application and has attached the required documents. I grant permission to the school of higher education my child attends to release information concerning my child's enrollment status, academic standing and financial need to the 109<sup>th</sup> Infantry Regiment Association for use in administering my child's scholarship award. In submitting this application, I certify that the information is complete and accurate to the best of my knowledge. I understand and agree that, falsification of information will result in termination of the 109<sup>th</sup> Infantry Regiment Association Legacy Scholarship.

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Parent's/Guardian's Signature

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Date