



AMERICAN LEGION AUXILIARY
Department of New Hampshire
ADRIENNE ALIX Award
A \$1,000.00 Award



Name _____

Address _____

Telephone _____ E-mail _____ Date of Birth _____

Occupation _____ Income _____

Name of college or school applicant desires to attend, and course of study you wish to pursue:

Date _____ Signature of Applicant _____

DEADLINE: March 15

**MAIL TO: American Legion Auxiliary
Department of New Hampshire
21 S. Fruit St. Suite 266
Concord NH 03301-2428**

RULES:

1. Applicant must be a person who is:
 - A: Re-entering the work force or upgrading skills;
 - B: Displaced from the work force; or
 - C: Recently, honorably discharged from the military
2. Award must be used for a refresher course or to advance the applicant's knowledge of techniques needed in today's work force.
3. Applicant must be a resident of the State of New Hampshire or be a member of a Unit of the American Legion Auxiliary, Department of New Hampshire for three (3) consecutive years including the current membership year and maintain membership through at least the award year.
4. Application must be accompanied by three (3) letters of recommendation with the name, address, and telephone number of the person writing the recommendation.
 - A: Two (2) adult citizens, other than relatives
 - B: One business member, employer, or former employer
5. Please include a list of any community organizations or activities in which you have participated.
6. Please write a short essay, not to exceed 500 words, explaining your career goals and objectives.