

VFW AUXILIARY  
DEPARTMENT OF NORTH CAROLINA

**PRELIMINARY APPLICATION 2017-2018 YEAR**

**\*PLEASE PRINT OR TYPE ALL INFORMATION EXCEPT YOUR  
SIGNATURE**

**PLEASE DO NOT SKIP ANY BLANKS. RETURN BEFORE FEBRUARY 15, 2018**

FULL NAME \_\_\_\_\_  
(last) (first) (middle)

ADDRESS \_\_\_\_\_  
(number, street, or route)

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

PHONE \_\_\_\_\_ SSN. \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_

**ELIGIBILITY: MEMBER UNDER WHOM YOU ARE APPLYING, MUST BE A 2017-2018  
CURRENT OR 2016-2017 IMMEDIATE PAST YEAR MEMBER.** Check person below.

I am applying under my,  
Father \_\_\_ Mother \_\_\_ Stepfather \_\_\_ Stepmother \_\_\_ Grandfather \_\_\_ Grandmother \_\_\_

**IMPORTANT!! PLEASE FILL OUT THE FOLLOWING INFORMATION OF PERSON  
(MEMBER) UNDER WHOM YOU ARE APPLYING:**

FULL  
NAME \_\_\_\_\_  
(last) (first) (middle)

ADDRESS \_\_\_\_\_

POST NAME \_\_\_\_\_ POST NUMBER \_\_\_\_\_

MEMBER'S CARD NO - ANNUAL \_\_\_\_\_ LIFE \_\_\_\_\_

**PLEASE HAVE CURRENT POST OR AUXILIARY OFFICER FILL OUT STATEMENT BELOW.**

I hereby agree and take full responsibility that the member stated above is in good standing for the 2017-2018 current year or 2016 -2017previous year.

I hereby agree and take full responsibility that the above listed member was a member in good standing at time of death. Date of Death \_\_\_\_\_.

Post/Auxiliary Officer's Signature \_\_\_\_\_ Title \_\_\_\_\_  
Post No. \_\_\_\_\_ Date \_\_\_\_\_

NAME OF YOUR HIGH SCHOOL\_\_\_\_\_

SCHOOL'S MAILING ADDRESS\_\_\_\_\_

\_\_\_\_\_

SCHOOL'S PRINCIPAL'S NAME\_\_\_\_\_

(last)

(first)

(middle)

GRADUATION DATE\_\_\_\_\_

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**I hereby make application for consideration as a candidate for the Erline Mayberry Scholarship. I understand that to be eligible to apply, I must be a Senior and intend to enroll in a College in North Carolina, also the member under whom I am applying must be a 2017-2018 current or a 2016-2017 previous year member and this form must be signed by the Post or Auxiliary Officer.**

**A final confidential application will be mailed to you after receipt of this form.**

**The final application is to be filled out and returned with other requested information before April 15, 2018.**

Signature\_\_\_\_\_Date\_\_\_\_\_

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**Return this Preliminary application BEFORE FEBRUARY 15, 2018 to:**

**Erline Mayberry Scholarship Chairman  
Farres H. Upton  
653 Haynes Road  
High Point, NC 27262**

**\*\*THIS FORM MAY BE DUPLICAZTED FOR DISTRIBUTION TO STUDENTS\*\***