SCHOLARSHIP MID-YEAR & YEAR-END REPORT

Mid-Year Report -Must be received by District President by December 10, 2023 Year-End Report -Must be received by District President by April 10, 2024. District President will forward to Department Chair by December 20 and April 20 respectively.

Auxiliary	Number	District			
Voice of Democracy	Audio/Essay Contest:				
	• Did your auxiliary assist the VFW Post with this program?			NO	
• Did your post/Auxiliary have an entry in the contest?			Yes	NO	
• Number of Auxiliary members assisting with the program?			#		
• Total number of hours Auxiliary members spent on program?			#		
Patriot's Pen Essay (Contest:				
• Did your Auxiliary assist the VFW Post with this program?			Yes	NO	
				NO	
• Number of Auxiliary members assisting with the program?			#		
• Total number of hours Auxiliary members spent on program?					
Young American Cr	eative Patriotic Art: Tw	o Dimensional			
-	iliary promoted this program i	n your community?	Yes	NO	
Did your Aux	iliary have an entry in the con	test?	Yes	NO	
• Number of stu	idents submitting an entry.		#		
• Total dollar as	mount awarded?				
3-Dimensional Patrio	otic Art Contest:				
Has your Aux	iliary promoted this program i	n your community?	Yes	NO	
Did your Aux	iliary have an entry in the con	test?	Yes	NO	
• Number of stu	idents submitting an entry.		#		
• Total dollar amount awarded?					
Continuing Educatio	on Scholarship:				
Has your Aux	iliary promoted this program t	to Auxiliary sisters and Brothers?	Yes	NO	
	iliary have an entry in this con		Yes	NO	
• Number of Au	uxiliary members assisting wit	h this program:	#		
• Total number of hours Auxiliary members spent on program?					
• Did your Aux	• Did your Auxiliary make a donation if so, how much		\$		
• Did your Aux	iliary publicize these contests	in the community?	Yes	NO	
Statewide Project:					
• Did your Aux	iliary participate in the statewi	ide project?	Yes	NO	
• How much m	oney was raised? Amount \$_	Check #			
• Did your Aux	iliary participate in a media ev	vent?	Yes	NO	
•	done so on a monthly report p	please attach newspaper articles, we	bsite prin	ntouts, pictures,	
etc.		h	щ		
	Number of Auxiliary members assisting with program?Total Number of Hours Auxiliary member spent on program?			# #	
• Total Number	of hours Auxiliary member s	pent on program?	#		
Auxiliary Chairman:					
Phone number:					
Email:					