

# Student Application Class Dates - January 9 - 12, 2025

Department Headquarters, Orlando

Section One – Personal Information					
Last Name	First	MI			
Mailing Address					
City	State	Zip			
Cell Phone	Home Phone				
Email Address	DOB	Gender			
Section Two - Military and American Legion S	Service				
Branch(es) of Service	Dates of Servi	ice			
Year Joined Legion American L	Legion Post # Membership I	D			
List American Legion Offices previously/currently held and when:					
Date Completed The American Legion Extension	on Institute (Required) Month	Year			
Section Three – Education and Career Information					
Educational Background (Check highest level achieved)					
Educational Background (Check highest level ac					
		Some College			
High School Diploma	chieved)	Some CollegePostgraduate Degree			
High School Diploma	chieved)  Technical/Trade Degree  Bachelor's Degree	Postgraduate Degree			
High School Diploma Associate Degree	chieved)  Technical/Trade Degree  Bachelor's Degree	Postgraduate Degree			
High School Diploma Associate Degree	chieved)  Technical/Trade Degree  Bachelor's Degree  job and how long you have been in that position	Postgraduate Degree			
High School Diploma Associate Degree Professional Background (Briefly describe your	chieved)  Technical/Trade Degree  Bachelor's Degree  job and how long you have been in that position	Postgraduate Degree			

Section Four – Written or typed essay (required – must be included with this application)

### FLALC Selection Committee Letter

The FLALC Selection Committee will review applications and make the final selection by December 1, 2024. In 300 words or less, tell them why you want to attend the Florida American Legion College and how you would apply the knowledge you will acquire and will help your District and the Department of Florida. This is an important part of the selection process and it is an opportunity for you to present yourself in your own words. Your comments must be typewritten (use pages 3 & 4).

## The American Legion, Department of Florida Legion College

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Last Na	me	First	Member ID		
Section	Five – Lodging and Accomm	odation Information			
Courtyard by Marriott Orlando-Altamonte Springs Maitland is located at 1750 Pembrook Dr, Orlando, FL 32810, located near Department Headquarters. Lodging is provided to the students during the authorized dates. Students are recommended to share a room with another Legion College Student. If student would like their own room, an additional charge of \$193 will be necessary. Each student will be responsible for additional charges (such as phone calls, internet service or room service) during the week. All telephone calls, including local or toll-free calls, may have access fees and will be charged to the student's account.					
(please checkor applica	list on a separate page what the ut with the hotel. A \$300 Regis	ose restrictions or special tration Fee is required t	odations, such as handicap accessibility needs might be). Any outstanding charg for rooms, coffee, and lunches. The February email. For those students that don't respectively.	ges must be cleared at ee MUST accompany the	
Preferre	ed Hotel Roommate				
I have i	read the prerequisite requirem	ents and desire to attend	The Department of Florida American	Legion College.	
Signatu	ıre		Date		
Section	Six – Area Commander Reco	mmendation (at least two	o signatures required, print name & titl	le)	
1.	Provide six words that best do	escribe this candidate (i.e.	. forceful, energetic, dedicated, etc)		
	(1)	(2)	(3)		
	(4)	(5)	(6)		
2.	<ol> <li>What are the candidate's goals for advancement in The American Legion?</li> <li>(a)</li> </ol>				
	(b)				
	(c)				
3.	Why do you believe this candidate should attend the Department of Florida American Legion College? (a)				
	(b)				
	(c)				
4.	What might this candidate be	hat might this candidate be doing for the American Legion in:			
	One year: (a)	(b)	(c)		
	Five years: (a)	(b)	(c)		
5.	Within the next five years, might you comfortably elect this candidate as your (Check all that apply):				
	Department Memb	ership Chair	District/Area Commander	Department Commander	
Post Co	ommander / District Comma	nder/ Area Commander	or Higher (Sign & Print Name)	Date	
Post Co	ommander / District Commai	nder/ Area Commander	or Higher (Sign & Print Name)	Date	

Last Name	First	Membership ID

#### **HOW TO SUBMIT:**

Send application, essay, and registration fee to: American Legion, Department of Florida, Attn: FALC PO Box 547859, Orlando, FL 32854

No later than November 25, 2024. Registration fee MUST accompany the application and essay.

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