



The American Legion GEORGIA BOYS STATE, INC.



American Legion Post Number _____ Location _____

APPLICATION FOR THE 2008 SESSION

() Principal Delegate () Alternate Delegate If an alternate, name of person replacing _____

SECTION 1: TO BE COMPLETED BY STUDENT AND PARENTS (TYPE OR PRINT NEATLY. WE MUST BE ABLE TO READ EACH ENTRY)

(Directions on Back)

Student Name _____ Date of Birth _____

As you want it to appear on all documents First Middle Last

Address _____ Parent or Guardian's Name _____

City _____ Zip Code _____ Phone () _____

Your E-Mail Address _____ Family E-Mail Address _____

***** I have visited the web site – <http://www.gaboysstate.com> – and reviewed the orientation slides for the upcoming session.

Future correspondence will be via e-mail and the web site if possible.

I UNDERSTAND THAT:

- THIS AMERICAN LEGION POST AND/OR OTHER SPONSORS HAVE PAID THE FEES FOR ME TO ATTEND BOYS STATE. THIS MONEY IS NOT REFUNDABLE. IF I AM UNABLE TO ATTEND AND A SUITABLE ALTERNATE IS UNABLE TO ATTEND, THE FEES WILL BE FORFEITED BY THE SPONSORING AMERICAN LEGION POST.
- THIS IS NOT A CAMP, BUT RATHER AN EDUCATIONAL PROCESS.
- I WILL NOTIFY THE SPONSORING AMERICAN LEGION POST AS FAR IN ADVANCE AS POSSIBLE IF I WILL BE UNABLE TO ATTEND.
- TO SATISFACTORY COMPLETE THIS PROGRAM, I MUST ARRIVE BEFORE 2:00 PM ON SUNDAY AND STAY UNTIL AFTER GRADUATION ON SATURDAY. **THERE ARE NO EXCEPTIONS.**
- I GIVE PERMISSION FOR MY PICTURE AND/OR VOICE TO BE USED IN THE PROMOTION OF THIS PROGRAM IN VIDEO, IN PRINT AND ON THE INTERNET.
- I AGREE TO ABIDE BY ALL RULES AND GUIDELINES OF THE AMERICAN LEGION GEORGIA BOYS STATE.

Student Signature

Date

Parent/Guardian Concurring Signature

Date

SECTION 2: TO BE COMPLETED BY THE HIGH SCHOOL (Directions on Back)

I certify that the above named student will meet the following criteria as of June of the program year.

- Be at least 14 years of age.
- Should successfully completed his junior year and have at least one semester remaining before graduation.
- Displays outstanding qualities of leadership, character, scholarship, loyalty and service to the school and community.
- **HAS A MINIMUM GPA OF 3.0. Exceptions must be approved in advance by the Director, Georgia Boys State.**

Student Ranks _____ in a class of _____ GPA _____

Name and Address of High School

Printed/Typed Name and Title of School Official

Phone Number

Signature

E-mail Address

Date

SECTION 3: TO BE COMPLETED BY THE SPONSORING AMERICAN LEGION POST (Directions on Back)

I certify that our Boys State Committee has met with the above named student and has selected him to be a representative of our Post, his High School and this Community at Georgia Boys State. I further certify that the above named student has not previously attended a Boys State Program. Additionally, our American Legion Post shall be responsible for arranging transportation to and from Georgia Boys State.

Printed/Typed Name and Title of Sponsoring Post Official

Post Number

Phone Number

Address

City/State/Zip

Signature

E-Mail Address

Date

Submit completed application to: The American Legion Georgia Boys State, Inc., 3035 Mt. Zion Rd, Stockbridge, GA 30281

PLEASE TYPE OR PRINT ALL INFORMATION

TO THE STUDENT AND PARENTS

1. Complete Section 1.
2. Type or print in block letters where it can be easily read.
3. Refer to the Georgia Boys State web site for additional information. Review the Orientation Slide Show at <http://www.gaboysstate.com>.
4. Read the section that begins with, "I UNDERSTAND THAT:"
5. Both student and one or both parents must sign and date the application.

TO THE HIGH SCHOOL COUNSELOR/COORDINATOR

Thank you for taking the time to complete Section 2 and for supporting our program. More information about Georgia Boys State is available at <http://www.gaboysstate.com>.

1. Complete Section 2.
2. Verify the information requested in the 4 bullets.
3. Provide either a GPA based on a 4.0 scale or a grade average on a scale of 100.
4. We realize that several schools do not rank students; however, the Samsung Scholarship awarded during Georgia Boys State request a class ranking. If no ranking is provided, then the student is provided a generic score for the academic portion. If at all possible, please provide a ranking.
5. Sign and date the application.

TO THE SPONSORING AMERICAN LEGION POST

1. Complete Section 3 after Sections 1 and 2 have been completed. Please provide both a contact telephone number and if possible an e-mail address. If an e-mail address is provided, confirmation of receipt of applications will be made.
2. It is the responsibility of the Sponsoring American Legion Post to verify all information on this form and that the information can be read. Incomplete applications will be returned.
3. Make a copy for your records and forward the completed application to:
The American Legion Georgia Boys State
3035 Mt. Zion RD
Stockbridge, GA 30281
770-289-8883 (Headquarters)
770-490-6269 (Director)

Additional copies may be downloaded from our website at: <http://www.gaboysstate.com>.