

Missouri State Society Daughters of the American Revolution LaDonna Nichols Scott 717 North 17th Street, Lexington, MO 64067-1127 (660)251-1302 rus.9421@gmail.com

INSTRUCTIONS:

The application packet must be complete and arranged in the order listed below. ALL original transcripts, letters of recommendation and other required documents MUST BE SENT TO THE STATE CHAIR POSTMARKED NO LATER THAN **JANUARY 1, 2024**, IN A SINGLE PACKAGE. PHOTOGRAPHS WILL RESULT IN DISQUALIFICATION AND SHOULD NOT BE INCLUDED. Scholarships are judged and awarded without regard to gender, race, color, religion, national origin or disability EXCEPT Irene and Leeta Wagy, which is for females only.

To acknowledge the receipt of your application include a self-addressed stamped postcard with your application. ONLY WINNERS are notified of the judge's decision. At this time, applicants notified of the pending scholarship award will be required to submit their university identification number. Scholarship must be used within one year or forfeited.

CHECK LIST:

- [] Scholarship Application (typed or computer generated see below)
- [] Statement of 600 words or less setting forth his/her career objectives (typed).
- [] Original transcript of high school grades.
- [] Must indicated class rank, size, GPA and test scores. Home schooled students include transcript for grade 9 through current year.
- [] Four letters of recommendation from school now attending. One from a principal or school Counselor, two teachers and one outside source. Letter should cover applicant's ability, work habits, integrity, character, potential and volunteer activities.
- [] List of extra-curricular activities, honors received, and scholarship achievements (one side of 8 1/2" by 11" paper)
- [] Photocopy of United States citizenship: birth certificate, naturalization papers, or information page from U.S.
 - Passport. Cover your photograph if you are submitting a copy of naturalization or passport pages.
 -] Financial Need Form: Not required, but financial need is one element considered.
- [] Application packet must be stapled or paper clipped in the top left hand corner not to exceed 15 pages.
- [] A separate application packet must be submitted for each scholarship (not just separate cover application).
- [] Incomplete applications will not be considered, nor will applications postmarked after January 1.

APPLICATION

NAME OF SCHOLA	RSHIP (Refer to Fact	Sheet)		
Name of Student		E-mail	Phone	
Permanent Address		City/State	Zip Code	
Class Rank/Class Siz	ze	Cumulative GPA/Scale	Test Scores SAT/ACT	
Include complete a	ddress for the collec	ge/university department to	receive and credit any funds a	warded.
Name of college/univ	versity			
Department	Street Address	City/Sta	te Zip Code	
Name of sponsoring	DAR Chapter (if appl	icable) C	hapter Contact	