

Missouri State Society Daughters of the American Revolution

MSSDAR Scholarship Committee Chair Barb Smith 10 Magnolia Dr., St. Louis, MO 63124 scholarship@mssdar.org

The application must be completed 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, 2026**, IN A SINGLE PACKAGE. 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. INCLUDING PHOTOGRAPHS OF APPLICANTS WILL RESULT IN DISQUALIFICATION.

In order for MSSDAR 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.

CHE	CK LIST:				
[]		plication (typed).			
[] Statement of 600 words or less setting forth his/her career objectives (typed).					
įį	ink, class size, GPA, and ACT test scores.				
	Home schooled	students must include	de transcript for grade 9 thre	rough current year.	
	If test scores ar	e not on transcript, p	roof of scores must be attached	iched. If school does not rank students, a	
	statement from	the school stating stu	udent is in the top 10% of c	class must be included in recommendation	
	letter from school.				
[]	Four letters of recommendation from school now attending. One from a principal or school counselor, two				
	from teachers, and one from a nonacademic source. Letter should cover applicant's ability, work habits,				
	integrity, character, potential, and volunteer activities.				
[] List extra-curricular activities, honors, and scholastic achievements (one side of 8 1/2" by					
[]	[] Proof of United States citizenship: birth certificate, naturalization papers, or information page from				
	U.S. Passport. Cover/hide 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)				
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			APPLICATION		
NAME	OF SCHOLARSH	HIP (Refer to Fact Shee	et)		
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Name of Student			E-mail	Phone	
Name of Student			L-IIIali	FIIONE	
Permanent Address		City/State	Zip Code		
Class Rank/Class Size		Cumulative GPA/Scale	Test Scores SAT/ACT	_	
Inclu	de complete ad	dress for the colleg	e/university department t	to receive and credit any funds awarded	ı.
Mana	a of callege / wais	- m-i4.			
wame	e of college/unive	ersity			_
Depa	rtment	Street Address	City/S	State Zip Code	_
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Name	e ot sponsoring D	OAR Chapter (if appli	cable)	Chapter Contact Name and email	