## THE AMERICAN LEGION DEPARTMENT OF MISSOURI SCHOLARSHIP AWARD APPLICATION Shane Dean Voyles Memorial Scholarship

This application is limited to <u>only one student per high school</u>. The student is to be selected by the faculty of the school based on the criteria listed on the reverse side of this application.

## (Must be typewritten or printed legibly. Use plain paper to add supporting information)

Name and Address of High School	
Counselor's Name and Phone Number	( )
Full name of applicant	
Complete Address	
Phone # Home ( )	Date of Birth
SAT/ACT Score	Overall G.P.A.
Family combined gross annual income	
Number of children under 18 in the family	
List athletic activities applicant participated	
in while attending High School	
College applicant plans to attend	
Has he/she received an athletic scholarship?	If yes, which sport?
Extra circular activities applicant	
participated in?	
Community Service activities applicant	
participated in?	

Applicant's signature certifies that he / she understands scholarship eligibility requirements and will adhere to its conditions.

Applicant's signature certifies that he / she is not related to any member of the reviewing Education and Scholarship Committee; A.J. Noonan, Mark Reed, Alex Slocum, Rose Noonan, Robert "Bob" Maddox, or Thomas Tanner.

Applicant's signature grants The American Legion Department of Missouri the right to use applicant's name and / or likeness to publicize the Scholarship Program.

Date

Applicant's signature

This application for scholarship aid is being submitted with my knowledge and approval.

\_\_\_\_\_Date \_\_\_\_\_

Signature of Parent / Guardian

Please read carefully and follow all eligibility requirements. They must be strictly adhered to.

## Shane Dean Voyles Memorial Scholarship – One award of \$750.00.

The scholarship award will be paid at the beginning of the student's first semester at their college of choice. <u>Registrar's certification of enrollment is required before payment will be made</u>. A check will be issued to joint payees, the recipient and the Scholarship and Awards Officer or equivalent official at the school. **The faculty of each High School in the state of Missouri may submit only one student for this scholarship**. The Education & Scholarship Committee of The American Legion, Department of Missouri will determine the recipient of the scholarship. The decision of the Committee shall be final.

Supporting Information may be submitted as needed/desired.

## **Basis for Eligibility**:

- 1. Each High School in the state of Missouri may submit only one application for this award. Applicant must be selected by the faculty of the High School he/she is attending based on the individuals financial need, participation in athletics, participation in school activities/clubs, volunteer work, exceptional leadership qualities, high moral standards and extreme patriotism.
- 2. Recipient must be a full-time student in an accredited college or university in the state of Missouri.
- 3. Applicant must be a resident of the state of Missouri.
- 4. Must be attending an accredited college / university as a full-time student.

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All inquiries should be directed to Mr. A. J. Noonan, Chair (573) 872-9068 Letter will notify recipients after July 1, 2025.

Completed application should be mailed no later than <u>April 20, 2025</u> to: The American Legion Department of Missouri, Inc. Attn: Education and Scholarship Committee P.O. Box 179 Jefferson City MO 65102-0179 <u>This scholarship application may be obtained on the web at *www.missourilegion.org*</u>