

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

This application is limited to **only one student per high school**. 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, John Buckwalter, or Albert Jackson.

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. Registrar's certification of enrollment is required before payment will be made. 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 individual's 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.

The \$750.00 will be paid at the beginning of the student's first semester at their college of choice. Registrar's certification of enrollment is required before payment will be made. A check will be issued to joint payees, the recipient and the Scholarship and Awards Officer or equivalent official at the school.

All inquiries should be directed to Mr. A. J. Noonan, Chair (573) 872-9068

Letter will notify recipients after July 1, 2024.

Completed application should be mailed no later than April 20, 2024 to:

The American Legion Department of Missouri, Inc.

Attn: Education and Scholarship Committee

P.O. Box 179

Jefferson City MO 65102-0179

This scholarship application may be obtained on the web at www.missourilegion.org