**THE IRENE AND LEETA WAGY MEMORIAL FUND**

**SCHOLARSHIP APPLICATION**

*(Copy and use only this Form)*

This application is available for a high school senior, through Harmony Mission Chapter, Daughters of the American Revolution, for residents of the following school districts: Adrian, Appleton City, Ballard, Butler, Hume, Miami and Rich Hill.

As well as encouraging the preservation of history, the DAR promotes education and patriotic citizenship. Our National Motto is “God, Home and Country”. We therefore favor candidates who embody these values and maintain high standards of personal behavior. The scholarship amount is $500 per semester and **must be applied to any Missouri educational institution offering courses above the high school level.** It is renewable at the option of the chapter up to a total of $4,000.

**INSTRUCTIONS:** Please complete this application in detail by filling in all blanks. Applications must be typed or printed neatly. **Do not** send a picture or school transcripts.

APPLICATIONS MUST BE POSTMARKED OR DELIVERED NO LATER THAN **MARCH 1,2018 TO QUALIFY FOR CONSIDERATION.**

**NAME:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First Middle Date of Birth

**PARENT’S**

**NAMES:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number & Street City County State Zip Phone

**HIGH SCHOOL GRADUATION**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Year

**NAME OF COLLEGE YOU PLAN TO ATTEND**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COURSEOF STUDY**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WHAT ARE YOUR CAREER PLANS?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DURING THE PAST YEAR**: Class Rank \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Point\_\_\_\_\_\_\_\_\_\_\_

SAT or ACT score\_\_\_\_\_\_\_\_\_\_

Certified by: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_

**(Principle or Counselor must certify class rank, grade point, and test score)**

**PLEASE CHECK YOUR FAMILY’S ADJUSTED GROSS INCOME FROM LAST YEAR’S TAX RETURN:**

\_\_\_\_\_\_\_\_\_\_under $20,000 \_\_\_\_\_\_\_\_\_\_\_\_\_$20,000 to $30,000

\_\_\_\_\_\_\_\_\_\_$30,000 to $40,000 \_\_\_\_\_\_\_\_\_\_\_\_\_$40,000 to $50,000

\_\_\_\_\_\_\_\_\_\_$ over $50,000

**NUMBER OF DEPENDENTS IN YOUR FAMILY, EXCLUDING YOURSELF**

In College \_\_\_\_\_\_\_\_\_Grades 9-12\_\_\_\_\_\_\_\_\_\_\_\_\_ Grades K-8\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HAVE YOU REASON TO EXPECT SCHOLARSHIP OR AID FROM ANY OTHER SOURCE?**

Circle **YES** or **NO**. If **yes**, give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ON SEPARATE SHEET OF PAPER LIST SCHOOL ACTIVITIES AND HONORS.**

**ON A SEPARATE SHEET OF PAPER LIST COMMUNITY ACTIVITIES AND HONORS.**

**LIST WORK EXPERIENCE (INCLUDING FAMILY FARM OR BUSINESS), SALARIED OR VOLUNTEER.** (Indicate which) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DESCRIBE WHY YOU WISH TO BE A RECIPIENT OF THIS SCHOLARSHIP.** (Include such things as educational goals, financial need, marital status, etc.) Please limit your answer to 75 words.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ATTACH TWO LETTERS OF RECOMMENDATION**

**PLEASE NOTE! (One school related and the other non-family, non-school related)**

**The deadline for this application is March 1, 2018.**

Return application forms to: Margaret Roberts, 6770 NW St Rt FF, Adrian, MO 64720

816-297-8866 email: handm98@gmail.com