



Pennsylvania State Society Daughters of the American Revolution

2021 Pennsylvania DAR Scholarship Application (Please select only one)

- PENNSYLVANIA DAR STUDENT SCHOLARSHIP** - This scholarship is available to any high school senior residing in Pennsylvania who is graduating from a secondary school that is registered, accredited, approved or licensed through the Pennsylvania Department of Education. The applicant must provide a copy of their acceptance into an accredited program at a college/university. Eligibility for this scholarship is not limited to a specific field or area of study.
- LOUISE V. NELSON NURSING SCHOLARSHIP** - This scholarship is available to any high school senior residing in Pennsylvania who is graduating from a secondary school that is registered, accredited, approved or licensed through the Pennsylvania Department of Education. The applicant must provide a copy of their acceptance into an accredited nursing program at a hospital or college/university.
- MARY REIDER AMERICAN HISTORY SCHOLARSHIP** - This scholarship is available to any high school senior residing in Pennsylvania who is graduating from a secondary school that is registered, accredited, approved or licensed through the Pennsylvania Department of Education. The applicant must provide a copy of their acceptance into a course of study in American History at an accredited college/university.

An affiliation with the DAR is not necessary to qualify for any of these scholarships. Evaluation of all applicants will be made by the State Scholarship Committee who will then notify only recipients by May 15th. Applications will not be returned. Payment of this scholarship will be placed on deposit with the college or university prior to the fall term.

Local DAR Chapter _____

Applications must be postmarked to the local DAR Chapter by February 15, 2021.

APPLICATION MATERIALS/ATTACHMENTS

- ____ Completed Pennsylvania DAR Student Scholarship Application Form
- ____ Copy of acceptance letter to the college or university you will attend in the fall
- ____ Completed Financial Need Form
- ____ School Recommendation Form (completed by the Principal or School Counselor)
- ____ Two (2) personal letters of reference (non-relatives, in addition to School Recommendation)
- ____ Personal Essay on why a post-secondary education is important to you (max 350 words)
- ____ Student Resume (incl. academic honors/awards, extra-curricular activities, employment, etc.)
- ____ Official High School Transcript (School Profile is not required)
- ____ Results of SAT and/or ACT (if *not* reported on Official Transcript)
- ____ Signature of Chapter Regent or Chapter Scholarship Chairman

2021 PENNSYLVANIA DAR STUDENT SCHOLARSHIP APPLICATION

1. **Name** _____
Phone & E-mail Address _____
Permanent Address _____

2. **Name of Parents/Guardian** _____
3. **Name and Address of College or University**
Attach a copy of your letter of acceptance

I hereby affirm that the above is correct and I promise to use the scholarship funds for no other purpose than specified.

Applicant _____ **Date** _____
Signature

DAR Chapter _____

Chapter Regent/Scholarship Chairman _____

Address _____

Phone & E-mail _____

Chapter Regent or Scholarship Chairman _____
Signature

APPLICATIONS MUST BE SUBMITTED IN THIS ORDER:

- ___ Completed Pennsylvania DAR Student Scholarship Application Form
- ___ Copy of acceptance letter to the college or university you will attend in the fall
- ___ Completed Financial Need Form
- ___ School Recommendation Form (completed by the Principal or School Counselor)
- ___ Two (2) personal letters of reference (non-relatives, in addition to School Recommendation)
- ___ Personal Essay on why a post-secondary education is important to you (max 350 words)
- ___ Student Resume (incl. academic honors/awards, extra-curricular activities, employment, etc.)
- ___ Official High School Transcript (School Profile is not required)
- ___ Results of SAT and/or ACT (if *not* reported on Official Transcript)
- ___ Signature of Chapter Regent or Chapter Scholarship Chairman

FINANCIAL NEED FORM

Father/Guardian

Mother/Guardian

1. **Name** _____
2. **Employer** _____
- a. Taxable income as reported on prior year's tax return _____
- b. Non-taxable income _____
4. **Assets**
- a. Savings _____
- b. Home Equity _____
- c. Other Real Estate or Investments _____
- d. Farm or Business _____
- e. EFC _____
- (Expected family contribution from the FAFSA)

5. **What will you be able to contribute towards your education?** _____

6. **Estimated Education Costs:**
- a. Tuition & Fees _____
- b. Room & Board _____
- c. Books & Supplies _____
- d. Other Costs (list) _____

7. **Household Information**
Number of Dependents _____ How many will be in college during the year of the scholarship grant? _____

Please add any additional information concerning the financial assets and obligations which would explain your need for financial assistance: _____

Signature _____ **Date** _____
Father / Guardian

Signature _____ **Date** _____
Mother / Guardian

Signature _____ **Date** _____
Applicant

