

**THE AMERICAN LEGION DEPARTMENT OF MISSOURI  
SCHOLARSHIP AWARD APPLICATION**

**Joseph J. Frank Scholarship**

**(Must be typewritten or printed legibly)**

Full name of applicant \_\_\_\_\_  
Complete Address \_\_\_\_\_  
Phone # Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Graduation Date \_\_\_\_\_ SAT/ACT Score \_\_\_\_\_  
Year applicant attended Missouri Boys / Girls State/Cadet \_\_\_\_\_  
Patrol \_\_\_\_\_

\* Full name of (veteran) and your relationship i.e.; parent, grandparent or great grandparent

\*Name \_\_\_\_\_ \*Relationship \_\_\_\_\_

Family combined gross annual income \_\_\_\_\_  
Number of children under 18 in the family \_\_\_\_\_  
Name and complete address of High School \_\_\_\_\_

What community activities do you or have you participated in? Attach an additional sheet if necessary.

**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*

**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**

**Please read carefully and follow all eligibility requirements on reverse.**

## **Joseph J. Frank Scholarship - Five awards of \$750.00 each.**

The \$750.00 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.

### **Basis for Eligibility:**

1. One boy who has attended a full session of Missouri Boys State or Missouri Cadet Patrol and one girl who has attended a full session of Missouri Girls State or Missouri Cadet Patrol.
2. Must be the descendent\* of a veteran having served 90 days on active duty in the Army, Air Force, Navy, Marine Corps, Space Force, or Coast Guard of the United States, and having an honorable discharge. A copy of the veteran's discharge or separation notice must be submitted with the application. The copy must show the date the veteran entered service and the date the veteran left service.
3. Be a resident of the state of Missouri.
4. An unmarried dependent under the age of 21.
5. Must be attending an accredited college / university as a full-time student.
6. Consideration for scholarship will be determined annually for high school graduates in NEED of financial aid to attend a college / university.
7. Scholarship must be used the first fall semester of a college / university following graduation from high school.

**(\*) DEFINITION OF "DESCENDANT":** Any child, grandchild or great grandchild of a veteran who is unmarried and under the age of 21 and is (1) A legitimate child. (2) A child legally adopted. (3) A stepchild of and living in the veteran's home. (4) An illegitimate child (when necessary proof of relationship is provided).

**This scholarship application may be obtained on the web at [www.missourilegion.org](http://www.missourilegion.org)**