

OSDAR Scholarship Application Forms
Oklahoma Society Daughters of the American Revolution
Diane Hamill, State Scholarship Chairman
204 Stonewall Rd, Ardmore, OK 73401-1152
580-220-9613/mdhamill@hotmail.com

Student must have attended an Oklahoma college or university during the fall 2023 semester, and plan to attend an Oklahoma college or university for the fall following the scholarship award. Money for the scholarship will only be paid to an Oklahoma University or College

Name in full: _____

Permanent address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-mail: _____

Name and address of university or college you are now attending:

- Applicant must prepare a statement of one page or less setting forth his/her career objectives, specifying how college major or college plans relate to future professional goals.
- On a separate sheet, list extra-curricular activities, honors received, scholastic achievements, awards won and other significant accomplishments.
- Enclose two **dated** letters of recommendation from persons familiar with your school work.
- **One copy of an ORIGINAL college transcript from the fall 2023 semester in a sealed envelope from the College or University Registrar's office must be included.**
- Furnish a copy of ACT or SAT scores if available.
- High school seniors concurrently enrolled in college or university classes **must also** furnish a high school transcript in addition to the college or university transcript.

Sponsoring DAR Chapter: _____

Sponsoring DAR Chapter Regent's Name: _____

Address of Chapter Regent: _____

Phone of Chapter Regent: _____

Email of Chapter Regent: _____

I state that the information provided is correct on this application and all the attachments.

Date: _____ Signature of Applicant: _____

STATE OF OKLAHOMA)
) SS.
COUNTY OF _____)

Before me, the undersigned, a Notary Public in and for said County and State, on this _____ day of _____, _____, personally appeared _____, to me known to be the identical person who executed the within and foregoing instrument and acknowledged to me that he/she executed the same as his/her free and voluntary act and deed for the uses and purposes therein set forth.

Given under my hand and seal the say and year last above written.

Notary Seal: _____ Notary Public _____

My commission expires: _____

Return to your DAR chapter sponsor as shown on the previous page by January 31, 2024.

Contact information for OSDAR Chapters may be found at [OSDAR Chapters by City](#)

Applications MUST be submitted by US Mail, Fed-X, UPS, or other mailing systems.

E-Mail applications and transcripts are NOT acceptable.

Financial Need Form

Non-married applicants who are independent of parents should substitute their financial information in place of mother.

Married students should substitute spouse in place of father and indicate by circling "Spouse".

If you prefer that only the Scholarship Chairman and Judges have access to your financial information below, please submit this page in a sealed envelope marked Financial Need Form.

Father's or Guardian's name	Mother's name
Give name of Spouse if applicant is married	Name of Applicant if living independently
Name _____	Name _____
Address _____	Address _____
Employer _____	Employer _____
Position _____	Position _____
Annual Income \$ _____	Annual Income \$ _____

Other sources of income or financial aid:

Age of siblings still in home of parent or student's own dependent children (note those who may be attending college at the same time as applicant.):

Other scholarships applied for or already received:

Estimated costs: Tuition fees for fall semester: _____ Per hour cost:\$ _____ Number of hours: _____

Room and Board per semester: \$ _____
(Note: include room and board expense only if living in University or College housing)

Books per semester: \$ _____

Other relevant information regarding financial need

I attest that all information is correct on this financial form.

Signature of Father, Guardian, or Spouse

Signature of Mother if applicable

Signature of Applicant

Check List

If you answer NO to any of the following questions, your application is NOT ready for submission.

Applications MUST be submitted through a sponsoring DAR Chapter.

Do NOT mail to the State Chairman. The sponsoring DAR Chapter will forward all applications to the State Chairman.

Check off list:

You have completed the Scholarship Application with a notary signature and seal/stamp.

You have completed the Financial Need Form.

You have provided a statement of educational and career objectives.

You have provided a list of school, church, and community activities.

You have included two (2) dated and signed letters of recommendation.

You have included an **official** transcript for the fall 2023 semester from the college or university you are currently attending. **It must come to the State Chairman in the sealed envelope that was provided by your school's Registrar.**

You have submitted the application to the sponsoring DAR Chapter Regent listed on the first page of the application form.

If you have obtained the application through your college or university and need the name of the local DAR Chapter and Chapter Regent - information can be found by emailing the chapter regent. Chapter Regent's email address may be found at [OSDAR Chapters by City](#).

If you have answered yes to all the questions listed above, your application is ready for submission.

Due Date is January 31, 2024