

# LAVERNE NOYES SCHOLARSHIP

## INSTRUCTIONS AND FORM

*The purpose of LaVerne Noyes in establishing these scholarships was to express his gratitude to, and in a slight degree to reward, those who ventured the supreme sacrifice of life for this country and for mankind in this war for the liberty of the world, and, also, to aid in keeping alive, for generations to come, the spirit of unselfish patriotic devotion which these men displayed and without which no free government can long endure.*

—Estate of LaVerne Noyes

### Eligibility

To be eligible for the LaVerne Noyes Scholarship you must:

- be a U.S. citizen and a direct descendant of an American Army or Navy veteran of World War I whose service was terminated by death or an honorable discharge;
- be an undergraduate student enrolled full time in a degree program at the University of Minnesota; and,
- demonstrate need as determined by the Free Application for Federal Student Aid (FAFSA).

Academic standing will also be considered in the selection process. The scholarship is not available for summer.

### Applying

Your FAFSA must be submitted to the federal processor no later than May 15. In addition, please complete the LaVerne Noyes Scholarship Application on the reverse side of these instructions. Submit the completed form to the Office of Student Finance at the address below.

**First-time applicants** must include the following documentation with their application. (Further documentation may be requested on an individual basis.)

- copies of official documents that establish the military service of the World War I veteran on which your application is based, e.g., enlistment records, honorable discharge certificates, certification letter from the Veterans Administration; and,
- copies of documentation that verify your blood relationship to the World War I veteran. Acceptable documentation may include a marriage license(s) and/or birth certificate(s) of yourself, your parent, and your grandparents.

### Please send your completed application to:

Scholarship Unit  
Office of Student Finance  
University of Minnesota, Twin Cities  
200 Fraser Hall, 106 Pleasant Street S.E.  
Minneapolis, MN 55455-0422

**The scholarship application form is on page 2.**

# LAVERNE NOYES SCHOLARSHIP APPLICATION

**Return this form to:**  
 Scholarship Unit  
 Office of Student Finance  
 University of Minnesota, Twin Cities  
 200 Fraser Hall, 106 Pleasant St. SE  
 Minneapolis, MN 55455-0422  
 Phone: 612-624-1111  
 Fax: 612-624-9584

To complete online, open in Adobe Reader (free at Adobe.com), not a Web browser, to protect your private information. Place the cursor in a field and type. Print each page when completed. Add the required signature(s) in blue or black ink.

## SECTION 1. Student information

Student name (Last, first, MI)		
Student ID number	University e-mail address	Phone number (include area code)
Mailing address (street and apartment or PO Box, city, state, ZIP code)		
What year in college will you be during the academic year? <input type="checkbox"/> freshman <input type="checkbox"/> sophomore <input type="checkbox"/> junior <input type="checkbox"/> senior <input type="checkbox"/> graduate or professional		
Are you a United States citizen?..... <input type="checkbox"/> yes <input type="checkbox"/> no		
Which campus will you be attending in the upcoming year?..... <input type="checkbox"/> Crookston <input type="checkbox"/> Duluth <input type="checkbox"/> Morris <input type="checkbox"/> Twin Cities		
Have you previously attended the University of Minnesota?..... <input type="checkbox"/> yes <input type="checkbox"/> no		
Have you previously applied and submitted documentation for this scholarship at the University of Minnesota?..... <input type="checkbox"/> yes <input type="checkbox"/> no		
If a previous applicant, please give the year you submitted the documentation: _____		

## SECTION 2. Veteran's service record

Veteran name		Relationship to you	
Length of service prior to November 11, 1918		Months	Days
Length of service overseas prior to November 11, 1918		Months	Days

Please outline below how your descent from the veteran can be traced.

Name	Relationship to you

## SECTION 3. Certification

To the best of my knowledge, the information included on this document is true. I understand that misrepresentation of facts in connection with this document whenever discovered may be sufficient cause, in and of itself, for cancellation or repayment of my scholarship. I understand that if any changes in my enrollment status or other financial aid occur, my eligibility may change.

I understand that in applying for and/or accepting a scholarship from the University of Minnesota, I give permission to the Office of Student Finance to release my application and/or scholarship award information to the University of Minnesota Foundation and scholarship donors, and to announce receipt of my scholarship(s) in newspapers, college brochures and newsletters, and other publications.

Student signature	Date
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To request copies of this form in an alternative format, please call the Disabilities Services liaison for financial aid at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator.