



## Office of Student Financial Aid

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## LAVERNE NOYES SCHOLARSHIP

### Background

According to the Estate of La Verne Noyes, *“the purpose 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.”*

### Eligibility

- Scholarship is limited to no more than eight semesters
- Funding is limited and the yearly amount of the scholarship will vary
- To be considered for the La Verne Noyes Scholarship you must:
  - be a U. S. citizen
  - show financial need as determined by the Free Application for Federal Student Aid (FAFSA)
  - be a direct descendant (child, grandchild, great-grandchild, etc.) of a **World War I veteran** of the U.S. Army or Navy who served as specified on the application form and whose service was terminated by death or honorable discharge
  - be enrolled full-time in an undergraduate program, not have a prior undergraduate degree, and be maintaining Satisfactory Academic Progress

### Application Process

Submit your FAFSA to the federal processor by March 1. You **must demonstrate financial need** in order to be considered. Complete the La Verne Noyes Application and return it to the Office of Student Financial Aid by March 1. Newly admitted students will be notified by May 1. Currently enrolled students will be notified in late May.

**First-time applicants** must include documentation verifying the service record of the **World War I** veteran on whose service you are applying. This may include copies of enlistment records, discharge certificates, or other certification from the Veterans Administration.

We understand that providing the veteran’s service record is sometimes a very challenging task. However, due to the terms under which the scholarship was established, you must provide documentation of the veteran meeting the service criteria as outlined on the application form.

In addition to family records, the following resources may be useful in locating the necessary documentation:

1. The U.S. National Archives and Records Administration: <https://www.archives.gov/veterans/>
2. County Courthouse in the county the veteran was living at the time of enlistment/discharge
3. National Archives in St. Louis: <https://www.archives.gov/st-louis/military-personnel/>
4. Some libraries offer access to online databases provided by Ancestry.com, Newspapers.com, etc.
5. The state historical library or society in the state your veteran resided

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# LAVERNE NOYES SCHOLARSHIP APPLICATION

## SECTION 1: Student Information

Student Name: \_\_\_\_\_ UI Student ID: \_\_\_\_\_

Are you a United States citizen?  Yes  No

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## SECTION 2: World War I Veteran and Descendent Information

Full name of World War I veteran whose service this application is based upon:

\_\_\_\_\_

Veteran's relationship to applicant: \_\_\_\_\_

Outline your lineage from the Veteran:

Student's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Grandparent's Name: \_\_\_\_\_

Great-Grandparent's Name: \_\_\_\_\_

Date and place of veteran's enlistment: \_\_\_\_\_

Date and place of veteran's honorable discharge: \_\_\_\_\_

Indicate which of these criteria the veteran met and attach documentation:

- Served on active duty **overseas** between April 6, 1917 and November 11, 1918
  - Died in service between April 6, 1917 and November 11, 1918
  - Served **at least 6 months** non-combat duty between May 11, 1917 and November 11, 1918
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## SECTION 3: Certification—Affidavit-Notarization Required for First-Time Applicants Only

I do hereby swear and affirm that i am a direct descendent of the above veteran and the supporting military/naval documentation are true and accurate.

Signature of Student Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



Subscribed and affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

at \_\_\_\_\_, (city or town) \_\_\_\_\_ (state)

Signature of Notary Public: \_\_\_\_\_ Date: \_\_\_\_\_

Commission Expires: \_\_\_\_\_

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Return this application to:

The University of Iowa  
Office of Student Financial Aid  
208 Calvin Hall  
Iowa City, IA 52242

FAX: 319-335-3060

Email: [financial-aid@uiowa.edu](mailto:financial-aid@uiowa.edu)