



National Society Daughters of the American Revolution

Ginnie Sebastian Storage, President General

DAR GOOD CITIZENS COMMITTEE — Kimberly Daniels, *National Chair*
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STUDENT INFORMATION SHEET

**This cover sheet must be forwarded to the local sponsoring DAR chapter
for your school's DAR Good Citizen winner.**

Please TYPE or PRINT all information and be sure to complete all blanks.

RETURN FORM AND COMPLETED MATERIALS TO:

Sponsoring DAR chapter/chapter code _____ **Deadline** _____
Contact person _____ Phone _____
Address _____
E-mail _____

STUDENT INFORMATION:

First / Middle / Last Name _____
Address _____
E-mail _____ Phone _____
Parents or guardians (First / Middle / Last Name) _____
Parent e-mail _____ Parent phone _____
Signature of student _____
Signature of parent/guardian _____

SCHOOL INFORMATION:

School Name _____
Faculty e-mail _____
Address _____
School or faculty contact _____ Phone _____
Are you competing in the scholarship contest? ☐ YES ☐ NO

THE FOLLOWING IS TO BE COMPLETED BY SCHOOL ADMINISTRATOR

I, _____, have known _____, in
(Print your name) (Print student's name)
Grade _____ for _____ in my capacity as _____
(Length of time) (Relationship to student)

and that to my personal knowledge the student has demonstrated the qualities of a Good Citizen as set forth in your criteria and, in my opinion, is most deserving of recognition by your organization. If our DAR Good Citizen competed in the scholarship portion of the contest, I have reviewed the information the student is submitting to you and have found it to be accurate and entirely consistent with our records.

Signature _____
Title _____
E-mail Address _____
Address _____
Phone _____