

DEPARTMENT OF AGRICULTURE
MISSOURI STATE UNIVERSITY
APPLICATION FOR SCHOLARSHIP
(Master of Animal Science Graduate Student)

Date _____

Name _____ MSU ID _____

Last First Middle

Local Address _____

Number Street City State Zip Local Phone #

Permanent Address _____

Number Street City State Zip Permanent Phone #

University which awarded Bachelors' Degree _____
Name Year

List major high school activities (4-H, FFA, church, youth groups, etc.)

	<u>Name of Activity</u>	<u># of Years Participated</u>	<u>Offices Held</u>
1.	4-H	_____	_____
2.	FFA	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

List major College Activities

	<u>Name of Activity</u>	<u># of Years Participated</u>	<u>Level of Participation</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

Semester and year first enrolled at MSU: _____

Graduate Advisor: _____

Graduate Studies: _____

Expected date of MSU graduation: _____

College and/or university credit hours Cumulative

	<u>Name</u>	<u>Dates Attended</u>	<u>Credit Hours</u>	<u>GPA</u>
1.	MSU _____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Extracurricular activities related to Animal Science:

<u>Activity</u>	<u>Description of Participation</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

Employment goals after graduation

By submitting this application, the applicant consents to a release of my personal and financial records as reported on the FAFSA to the selection committee for the purpose of scholarship selection as well as to the donor making this award possible, for purposes of acknowledgement. I certify that the information submitted herein is true and correct.

Date _____

Due September 11 by 5:00 p.m. to:

Department of Agriculture Missouri State University 901 S. National Karls 201 Springfield, MO 65897