

The application deadline is June	1 of the current vear.	Your application packet	should include the following items:

- ✓ Completed application
- ✓ Transcript, including ACT or SAT scores
- ✓ Three letters of recommendation
- ✓ One page essay
- ✓ Résumé

Please return the completed application package to:

Missouri Department of Higher Education Attn: MUELP 3515 Amazonas Drive Jefferson City, MO 65109

Please complete sections I, II and III. Section IV is to be completed by the financial aid office at the institution you plan to attend. Please type or print.

SECTION I - APPLICANT DEMOGRAPHIC INFORMATION						
1. APPLICANT STATUS						
	pient Seeking Renewal					
2. LAST NAME FIRS	ΓΝΑΜΕ	MI	3. SOCIAL SECURITY NUMBER			
4. PERMANENT STREET ADDRESS	5. CITY		6. STATE	7. ZIP CODE		
8. HOME TELEPHONE NUMBER	9. E-MAIL ADDRESS			10. DATE OF BIRTH		
11. GENDER	12. RACE/ETHNICITY					
14. CITIZENSHIP	nt 🗌 Otherwise lawful	y present in the U.S.				
15. FOR WHICH SEMESTER(S) IN THE UPCOMING ACADEMIC Y	EAR ARE YOU REQUESTING AID	2				
16. HOW DID YOU HEAR ABOUT THIS SCHOLARSHIP?						
<b>SECTION II - APPLICANT ACADEMIC INFO</b>	RMATION					
17. NAME OF HIGH SCHOOL FROM WHICH YOU GRADUATED OR WILL GRADUATE       18. H.S. CUMULATIVE GPA       19. COMPOSITE ACT OR SAT SCORE				OSITE ACT OR SAT SCORE		
20. CLASSIFICATION						
Freshman     Sophomore     Junior     Graduate Student						
MAJOR FIELD OF STUDY						
SECTION III - ESSAY, RÉSUMÉ, AND LETTERS OF RECOMMENDATION						
22. On a separate sheet provide a maximum one-page essay outlining your environmental education and career goals, including the discipline you are pursuing, the highest level of education you envision attaining in that discipline, the role this scholarship would play in the pursuit of your education, and your primary career goals upon graduation. Please attach the completed essay to this application.						
<ul> <li>23. On a separate sheet provide a résumé that includes the following information about yourself. Please attach the completed résumé to this application.</li> <li>School-related activities</li> <li>Honors or awards</li> <li>Community, volunteer, church, or youth group activities</li> <li>Talents or special interests</li> </ul>						
24. Please attach three letters of recommendation to this application. At least one of the letters must be from a counselor, principal, or college advisor.						
I hereby certify that the information contained in this application is true and correct to the best of my knowledge. I authorize the release of any information pertaining to my grades or academic standing to any Department of Higher Education representative who requests this information.						
25. APPLICANT SIGNATURE				26. DATE		

SECTION IV - STUDENT FINANCIAL AID OFFICE INFORMATION							
(To be completed by a financial aid officer at the school you plan to attend)							
27. NAME OF COLLEGE OR UNIVERSITY							
28. MAILING ADDRESS	29. CITY	30. STATE	31. ZIP CODE				
26. MAILING ADDRESS	29. 0111	30. STATE	31. ZIP CODE				
32. TELEPHONE NUMBER							
33. STUDENT'S MAJOR							
34. STUDENT'S MINOR							
The following items are <b>not</b> required for first-t	ime freshmen						
35.STUDENT'S CURRENT SEMESTER GPA							
36. STUDENT'S CUMULATIVE GPA							
37. IS THIS STUDENT ENROLLED FULL-TIME?							
	is true, complete and correct to the best of my	(knowledge					
38. SIGNATURE OF FINANCIAL AID OFFICER	is the, complete and correct to the best of my	Knowledge.					
39. PRINTED NAME							
40. PRINTED TITLE							
41. DATE							