

Instructions to Applicant

1. Please answer every question fully but concisely. Supplemental sheets may be attached if space is inadequate.
2. The application must be typewritten and submitted to the Scholarships Committee Office. Application materials will not be returned.
3. The applicant must request that an official transcript be forwarded to the Veterans of Safety Office, Humphreys 304, UCM, Warrensburg, MO 64093. (660) 543-4971

**Application for Veterans of Safety
Safety, Health, and Environmental Scholarship**

Personal Data:

Name in Full _____ Social Security No. _____

Current Address

Street _____ City _____ State _____ Zip _____

Home Phone Number () _____ Work Phone Number () _____

E-mail _____

Educational Background:

A: Institutions Attended (List high school and all post-secondary institutions attended.)

Name and Location	Date	Diplomas, Certificates or Degrees Received

B. Undergraduate Major(s) _____ Minor(s) _____

C. Cumulative university grade point average: Undergraduate__ Graduate (if appropriate)__

D. If available, indicate an aptitude test score and test name _____

E. Scholastic Honors Received _____

F. Activities: In what cultural, social, athletic, political or other activities have you participated or are you now engaged? _____

Indicate any offices you have held or are holding. What honors, prizes or awards have you received?

