



For Office Use

Scholarship: Book / Tuition

Semester: Fall/Spring/Summer

Scholarship Amount \$ _____

Account # _____

Acct. Name _____

Northeastern Oklahoma A&M College Development Foundation

200 I Street Northeast • Miami, Oklahoma 74354 • 918-540-6250 • www.neo.edu

Scholarship Application Fall 2013 – Spring 2014

Submit all of the following to the NEO Foundation Office located on the 2nd Floor of the Library or must be received in the mail/online by 4:00 p.m. on April 1, 2013:

1. The completed and signed application form.
2. A one-page essay about your current educational and career goals, your personal achievements, and why you are deserving of a scholarship.

Name _____ Student ID# _____
Last First

Home Address _____
Street Apt# City State Zip

Campus Address _____
Street Apt# City State Zip

Email Addresses _____
School email Personal email

Home Phone Number () _____ Cell Number () _____

Male___ Female___ Marital Status: Single___ Married___ # of dependent children___ Ages of children_____

Do you live with a parent or other adult relative? (Do not include your spouse) YES NO

EDUCATION INFORMATION & CAREER GOALS

High School Attended: _____ City/State _____

High School GPA _____ ACT Scores: Language Arts _____ Mathematics _____ Reading _____ Science _____ Composite Score _____

NEO Major: _____ Goal: Degree___ Certificate___ Transfer___

Expected date of graduation from NEO: _____20____ Expected date of transfer to another college: _____20____

If transferring, name of college you plan to transfer to: _____

What is your current educational goal? _____

What is your career goal? _____

You MUST select which scholarships you are applying for

**All scholarships listed in this section are subject to available funds.
Additionally, the amount of award is variable.**

Please see College Catalog for scholarship criteria

- | | |
|--|--|
| _____ Billie Pearl Able Memorial Scholarship | _____ NEO Concrete Scholarship |
| _____ Arvest Business Scholarship | _____ NEO Math Day Scholarship |
| _____ #3 BFT (British Flyers Training School) | _____ NEO Women’s Scholarship |
| _____ Business Accounting 2000 Book Scholarship | _____ Physical Therapist Assistant Scholarship |
| _____ Calcagno Art Scholarship | _____ Tom & Judy Poole Scholarship |
| _____ Dr. Jerry Carroll Scholarship | _____ Benjamin Quapaw Scholarship |
| _____ Dobson Alliance Scholarship | _____ Red Robertson Scholarship |
| _____ Drama & Theatre Endowed Scholarship | _____ Simpson Coed Athletic Scholarship |
| _____ Dan & Tim Drury Scholarship | _____ Spinning Arrow Boys & Girls Scholarship |
| _____ LeRoy & Pearl Dukes Memorial Scholarship | _____ Dr. Robert Swanson Memorial Scholarship |
| _____ Carolyn Elmore Memorial Scholarship | _____ JoAn Taylor Memorial Scholarship |
| _____ Charlein O. & Jim Fribley Scholarship | _____ Homa & Lois Thomas Scholarship |
| _____ David Froman Memorial Scholarship | _____ Kent & Kaylene Thomas Scholarship |
| _____ Janice Gatewood Scholarship | _____ B.J. Tunnell Memorial Scholarship |
| _____ Robert S. Gee Memorial Scholarship | _____ Carol Sue (Moore) Welch Memorial |
| _____ E.J. Grieshaber Social Science Scholarship | _____ Jake L. Whitecrow Scholarship |
| _____ Manhattan Construction Scholarship | _____ Charles Banks Wilson Art Scholarship |
| _____ Treva McColey Scholarship | _____ Roy Wilson Scholarship for Agriculture |
| _____ Mason McWatters Memorial Scholarship | _____ Ed Woodington Memorial Scholarship |
| _____ Amy Mesplay Memorial Scholarship | _____ Sam Wynn Memorial Scholarship |
| _____ Miami FOP Scholarship | _____ Michael J Youngwirth Scholarship |
| _____ Miami Rotary Club Scholarship | |

***Nursing Scholarships are determined by Nursing Department and are available to second year nursing students -
*Susan Graham Memorial Scholarship; Nursing Faculty Scholarship; Catherine Randall Nursing Scholarship;
Bobbie Wood Nursing Scholarship***

ACADEMIC ACTIVITIES, HONORS, EXTRACURRICULAR ACTIVITIES:

I give the Scholarship Committee permission to review my academic record. I authorize the information in this application to be used in the Awards program, if I am selected as a scholarship recipient.

SIGNATURE _____

DATE _____

Northeastern Oklahoma A&M College Development Foundation Scholarship Application Continued

Current Employer _____

Position _____ Hrs/Week _____ Monthly Income \$ _____

FINANCIAL INFORMATION

**All financial information must be accurately completed in order
for you to be considered for a scholarship**

Estimate your total Family Income and Expenses for the 2013/2014 school year

<u>Income:</u>	<u>Expenses at the College:</u>
Number of People in Household _____	Rent & Utilities \$ _____
Total Household Income \$ _____	Food _____
Aid from Parents & Relatives _____	Tuition & Fees _____
Financial Aid * _____	Books & Supplies _____
Gen. Assistance, SSI, other benefits _____	Transportation _____
Child and/or Spousal Support _____	Child Care _____
Other Income _____	Other _____
TOTAL \$ _____	TOTAL \$ _____

* I have applied for financial aid YES NO

The following information is voluntary and is requested for reporting purposes only, in accordance with the 1968 Civil Rights Act as amended

_____ American Indian or Alaska Native - Tribe _____

_____ Asian or Pacific Islander _____ African American

_____ Hispanic _____ White

_____ Other _____

APPLICATION DEADLINE: 4:00 P.M., APRIL 1, 2013