

## **NORTHERN ALUMNI FOUNDATION CLASS OF 1941 SCHOLARSHIP**

A scholarship for a student who will be attending MSU-Northern full time during the next academic school year. Supported by gifts from members of the Class of 1941, granted by the Northern Alumni Foundation. The scholarship is awarded a total of \$700 in equal amounts over Fall and Spring Semesters.

**DEADLINE: February 8, 2019**

Complete back page and submit with attachments to:

Northern Alumni Foundation  
Cowan Hall 305  
P.O. Box 1691  
Havre, MT 59501  
406-265-3711

1. First preference is given to relatives of members of the Class of 1941, followed by any alumni relative.
2. Incoming and/or continuing students are eligible.
3. Must enroll as a full-time student (12 or more credits).
4. List past and/or present school and/or community involvement.
5. Attach High School and/or College Transcript, or GED equivalent.
6. Attach a 500 word essay explaining why you are attending MSU-Northern, and your career goals.
7. Attach two letters of recommendation from anyone other than a family member.
8. Please indicate your financial need circumstances and whether you have Financial Aid and Admissions applications on file with the appropriate offices at Montana State University-Northern.

# CLASS OF '41 SCHOLARSHIP APPLICATION

Applicant's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_

Havre Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

High School: \_\_\_\_\_

Grade Point Average (GPA) \_\_\_\_\_

Date and Place of Birth: \_\_\_\_\_

Names and ages of Dependents: \_\_\_\_\_

\_\_\_\_\_

Class of '41 or other alumni relative (please indicate name and relationship):

\_\_\_\_\_

\_\_\_\_\_

Major Course of Study: \_\_\_\_\_

Other schools/colleges attended and degrees earned: \_\_\_\_\_

School and/or community involvement (Use an additional sheet of necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have a current Financial Aid form on file in the Financial Aid Office and I,  
\_\_\_\_\_, hereby authorize the Financial Aid Office at  
MSU-Northern to supply the necessary Needs Assessment information to the Alumni  
Scholarship Committee for their review in connection with my scholarship application.

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Student Signature

Date