

Scholarship for Service

NEW STUDENT APPLICATION

I. THIS CHECKLIST IS REQUIRED TO BE THE FIRST PAGE OF THE APPLICANT PACKAGE, AND MUST BE SIGNED BY THE STUDENT APPLICANT.

Provide address at school and permanent address as well (if different)

Student Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Degree Program: _____

Major: _____

Expected Graduation Date: _____

GPA: _____

Please attach two letter of reference and official transcripts to this application and deliver to:

Dr. Dave Dampier, Butler Hall, Room 300, Box 9637, Mississippi State, MS 39762-9637