NORTHERN ALUMNI FOUNDATION
GRADUATE STUDENT SCHOLARSHIP

This scholarship is for a student who will be attending MSU-Northern as a graduate student during the next academic school year. Supported by gifts from alumni and granted by the Northern Alumni Foundation.

DEADLINE: February 5, 2021
Complete back page and submit with attachments to:

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

1. Incoming and/or continuing students are eligible.
2. Must enroll as a part-time graduate student (minimum of 6 credits).
3. List past and/or present school and/or community involvement.
4. Attach a College Transcript, unofficial is accepted.
5. Attach a 500 word essay explaining why you chose MSU-Northern’s program over other offerings and your career goals.
6. Attach two letters of recommendation from anyone other than a family member.
7. Please indicate your financial need circumstances.
GRADUATE STUDENT 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: ________________________________

Major Course of Study: ________________________________

Other schools/colleges attended and degrees earned: ________________________________

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

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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.

Student Signature ____________________________ Date ____________