

Residence Life Leadership Scholarship Application

Optional Application: Students wishing to be considered for the Residence Life Leadership Scholarship should complete this application. Only students who enter college the fall immediately following high school graduation are eligible.

Southeast also offers many need-based scholarships which require you to file the FAFSA (Free Application for Federal Student Aid). This form is available at www.fafsa.gov. Southeast's Federal School Code is 002501.

For award guarantee, the application for admission and this Residence Life Leadership Scholarship Application must be received by December 1. Other qualified applications will be considered until March 1.

Date (mm/dd/yyyy)//			
Legal name Last	First	Mide	lle
Legal residence Street			P.O. Box
City	State	ZIP	County
Date of birth (mm/dd/yyyy)///	Student phone ()		
High school attended		Location (city and state) _	
High school graduation date (mm/dd/yyyy)	// GED (year)		
The following is considered for scholarships offe	ered by Southeast.		
Have you attended American Legion Missouri B	oys/Girls State? □Yes □No Attach a co	ppy of certificate or letter.	
Will you be a graduate of a Missouri Renaissand	e high school? □Yes □No Arecommen	dation letter from the Renaissance sp	oonsor is required for this award and should be attached.
Have you attained the Eagle Scout or the Girl Sc	cout Gold Award? □Yes □No Attach a	copy of certificate or letter.	
Were you a Hugh O'Brian Youth (HOBY) Leaders	hip Conference participant? 🗆 Yes 🏻	□No	
Are you a Missouri A+ Program participant?	Yes □No		
Provide a list of extra-curricular, community or	work activities (including high scho	ol organizations, service	. the arts. etc.).

ACTIVITY	sv S0		SCHOOL YEAR		DOCITIONS HELD/AWADDS // PADEDSHIP EVDEDIENCE	
ACTIVITY	9	10	11	12	POSITIONS HELD/AWARDS/LEADERSHIP EXPERIENCE	
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RESIDENCE LIFE LEADERSHIP SCHOLARSHIP APPLICATION

Additional honors/awards not previously listed
Work and/or volunteer experience
Applications should be postmarked by December 1 to be considered for the full award amounts. Applications received after the guarantee deadline of December 1 will be considered until March 1.
I affirm that all information supplied is complete and accurate. I understand that any misrepresentation or change of facts could be cause for refusal of admission, cancellation of admission or suspension from the University. I authorize all educational institutions I have attended to release official transcripts or other information relevant to this application.
Legal signature (in ink) Date
An Equal Opportunity/Affirmative Action Institution

Mail to: Office of Admissions Southeast Missouri State University One University Plaza Cape Girardeau, Missouri 63701-4710