

The Philip Driskill Scholarship for Children of Disabled Veterans 2016-17 Deadline: May 27, 2016

Applicants must be a child of a disabled veteran. For proof of disability, applicants should submit an official statement from the Department of Veterans Affairs certifying a disability (either service-connected or non-service-connected) of one of their parents.

Please attach a statement as to why this award would benefit you.

GPA: 2.5 or higher

PLEASE TYPE OR PRINT CLEARLY IN INK. APPLICANT INFORMATION			E-mail Address:			
Name			N#		Date of Birth	
(Last)	(First)	(MI)				
Permanent Address					County	
(Street	:)		(City)	(State)	(Zip)	
Telephone	Are you a U.S	. Citizen?	☐ Yes ☐ No	Are you an O	klahoma resident? 🗖 Ye	es 🗆 No
Are you currently receiving Veteran's Benefits or entitled to receive benefits to help fund your education?						
Yes No (please circle one)						
If Yes, at what percentage do ye	ou receive these	benefits?	?	%		
Which NSU campus do you plar Tahlequah ☐ Broken Arrow ☐ N		16-2017?	Which sen		Id you like to receive sc Spring ☐ Fall 2016 onl	-
What is your anticipated enrollment status during 2016-2017? ☐ Full Time ☐ Part-Time						
Cumulative College GPA	Total o	college ho	urs complete	d after Spring	2016:	
Probable college major:						
Some NSU scholarships are bas any statement below that appli	es to you.				·	
☐ I am not currently receiving s friend(s)and need assistance to	help fund my co	llege educ	ation.			
☐ I am currently financially respinsurance, tuition, fees and boo			, .	•	•	food,
☐ I plan to complete the federal student financial aid forms (FAFSA) for the academic year.						
Signature of applicant			Date			