Scholarship Guidelines

Scholarship Principles and the Amount of the Award

* This scholarship will be awarded to adult undergraduate students (those who have not previously earned a bachelor’s degree) entering college for the first time or returning after an absence from college of three years or longer.
* This award is only distributed in the fall and spring semesters.
* Scholarship recipients will be selected by a review committee based on the criteria outlined below and evidenced by a brief application, a personal written statement, and a letter of recommendation.
* The total amount of the scholarship is $1,050 (with $525 distributed over each of two semesters) which includes the value equivalent ($25) to an Evening Commuter parking permit for the two semesters the student is a scholarship recipient. Funds ($525) will be credited to the student’s account.

Number of Awards: 20

Eligibility:

To qualify for the first part of the two-semester scholarship, applicants must:

* Be 25 years of age or older
* Be enrolled in the first or second semester of his/her first college experience (excluding summer session) or be returning after an absence of three years or more (no transferable college credits earned for at least three years from any institution)
* Maintain enrollment in a minimum of 6 credit hours **(if the student does not maintain enrollment in a minimum of 6 credit hours, the student will be responsible for the entire amount of the scholarship and that amount will be charged back to the student’s account)**

To qualify for the second semester of the Return to Learn scholarship (if funding is available), applicants must:

* Have a 2.50 or better GPA after the first semester of his/her return to college study
* Maintain enrollment in a minimum of 6 credit hours **(if the student does not maintain enrollment in a minimum of 6 credit hours, the student will be responsible for the entire amount of the scholarship and that amount will be charged back to the student’s account)**
* Be enrolled in his/her second consecutive semester at Missouri State

The Application Process and Award Criteria

 Applicants will need to:

1. Submit his/her application materials (completed application, personal statement and letter of recommendation) by the application deadline to the Office of Adult Student Services.

 Email: AdultStudentServices@MissouriState.edu

 Mail: Missouri State University

 Adult Student Services

 901 S. National Avenue

 Springfield, MO 65897

 **Return by the end of the second week of classes.**

1. Register for the upcoming semester (as the student’s first or second semester) for the minimum number of credit hours by the deadline date (Note that it may be advantageous to apply early since the total scholarship fund has a fixed budget for each year).

1. Provide a personal statement in writing of no more than 300 words that addresses the award criteria as follows:
* The applicant’s educational goals
* Indicators that the applicant has the motivation and desire to follow through in accomplishing his/her educational goals
* Indicators that the applicant has the aptitude and potential for success as an adult student
* Optional: Include any special factors that the applicant wants to bring to the attention of the selection committee that may add to the strength of his/her application
* Attach the cover sheet included with this application package to your personal statement
1. Provide a signed letter of recommendation from someone unrelated to you that will address the award criteria indicated above. Attach the cover sheet included with this application package to the letter of recommendation.

**APPLICATION**

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**A. STUDENT INFORMATION** **(Please type or print)**

**Please indicate the semester and year you will be starting:**

MSU Student ID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D.O.B. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First M.I.

Preferred Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City State Zip Code

(H) Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (W) Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. EDUCATIONAL BACKGROUND**

Have you ever attended Missouri State University \_\_\_\_NO \_\_\_\_YES

 Dates Attended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Hours Earned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a transfer student? \_\_\_\_NO \_\_\_\_YES

If so, list all colleges, dates of attendance, and credit hours earned:

College Dates Attended Credit Hours Earned

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

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**Letter of Recommendation Cover**

**Please attach your letter to this cover sheet.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_is applying for the Return to Learn Scholarship at Missouri State. Please provide information you feel would be appropriate to assist the selection committee in the decision process regarding the applicant’s educational goals, motivation and desire to follow through in accomplishing his/her educational goals, and aptitude and potential for success as an adult student.

It is our pleasure to award these scholarship funds to well-deserving students. Thank you for your support for this individual, your assistance is greatly appreciated.

If mailing this letter under separate cover, please mail to:

Missouri State University

Adult Student Services – Meyer Library 108

901 S. National Ave.

Springfield, MO 65897

Date:

Name:

Your signature:

**Personal Statement Cover**

**(**Please attach your personal statement**)**

To:

Adult Student Services

Missouri State University

Adult Student Services – Meyer Library 108

901 S. National Ave.

Springfield, MO 65897

From:

Date: