

## Missouri Student Unions Student Employee Scholarship Application

\$500 Scholarship

Application Deadline: April 4 by 5 p.m.

PawPrint:

Name: Last, First

Phone:

Super	/isor:		Student Employment Start Date:	
Degree Program:			Expected Graduation Date:	Cumulative GPA:
Anticipa	ated Class Standin	g for August 2025:		
Dlassa	submit your resno	onese to the followin	ng questions (limit 500 words per que	action):
	•		· · ·	•
<ol> <li>Please provide an example of a time when your work contributions impacted so the Mizzou community.</li> </ol>				su someone or something to enhance
2)		-	as a student employee will prepare v	you for your future endeavors
,	•	e how your experience as a student employee will prepare you for your future endeavors. an innovative idea to enhance the services or programs of the Missouri Student Unions.		
0)	r icase snare arri	illovative laca to cili	named the services of programs of the	o Missouri Student Smorts.
Please	attach the followir	ng items to this appl	ication:	
<ol> <li>A current résumé.</li> </ol>				
2) Two (2) letters of recommendation.				
		_	r staff member of the Mizzou comm	<del>-</del>
	b. The other recommendation letter can be from faculty or staff member, co-worker, or off-campus			
	reference			
		nould address:		
		low and how long ha	•	· <del>-</del> · · · · · · · · · · · ·
			alities that contribute to the Mizzou (	community. This could include but not
	II.	mited to.	itiativa raspanaihility raspast diasa	vent eventlenes
		i. leadership, in	itiative, responsibility, respect, disco	overy, excellence
To qua	lify for and to be c	onsidered for this s	cholarship, applicants must meet th	e following minimum requirements:
-	•		ons for at least one (1) semester.	
2)	Intended to be e	nrolled in classes	until at least December 2025.	
3)	Must have a minir	mum cumulative GP/	A of 2.0	
				n reference to my application for the
				correct. By signing below, I give my
permis	sion for a iviissour	Student Unions off	icial to verify my student status at th	ne University of Missouri.
O:			Data	
Signature			Date	

Submit application and all related materials to: Tracy Schultz, <u>schultztl@missouri.edu</u>