P.E.O Montana Chapter V Martha Kuhr Living Memorial Scholarship

A scholarship for a female nursing student who will be attending MSUN full time during the academic year. Supported by gifts and funds from members of P.E.O. Chapter V Montana. The scholarship is awarded in equal amounts over Fall and Spring semesters.

DEADLINE: March 1, 2024

Complete back page and submit with attachments to:

MSU-Northern Foundation Cowan Hall Room 307 Or mail to: MSU-Northern Foundation P.O. Box 1691 Havre, MT 59501

- 1. First preference is given to a relative of members of P.E.O. Chapter V, followed by any sisterhood relative.
- 2. Incoming and/or continuing students are eligible.
- 3. Must enroll as a full-time student (12 or more credits).
- 4. Complete application (on following page)
- 5. List past and/or present school and/or community involvement.
- 6. Attach high school and/or college transcript, or GED equivalent.
- 7. Attach a 500-word essay explaining why you are attending Northern and your career goal(s).
- 8. Attach a letter of recommendation from anyone other than a family member
- 9. Please indicate your financial need circumstances and whether you have Financial Aid and Admissions applications on file with the appropriate offices at MSU-Northern.

P.E.O Chapter V Scholarship Application

Personal Information Applicant's Full Name: ______Age:_____ Address: ______ Phone #: _____ Permanent Home Address: _____ High School: College Grade Point Average (GPA) Date and Place of Birth: Intended Major at MSUN: ______ Other schools/college attended and degree earned: School and/or community involvement (use an additional sheet if necessary): I have a current Financial Aid form on file in the Financial Aid Office and I, _____, hereby authorize the Financial Aid Office at MSU-Northern to supply the necessary Needs Assessment information to the Scholarship Committee for their review in connection with my scholarship application. Further, I permit the release of my academic and biographical information to the P.E.O. Chapter V selection committee in order to be considered for the scholarship. I understand that any potential scholarship(s) I receive may be dependent on the academic programs I select, the status maintained and the information that is provided on this application. I certify by my signature that any information I provide is truthful and complete. Student Signature Date: