



## Boise State University Veterans Scholarship

One scholarship will be awarded annually. The Boise State scholarship committee will select the recipient based on the listed criteria.

Boise State University Veterans Scholarship
<p><b>AWARD PACKAGE:</b></p> <ul style="list-style-type: none"><li>❖ A \$750 scholarship towards tuition &amp; fees for two semesters. (Annual, not renewable) (Approximate total value per semester \$375.00)</li></ul>
<p><b>CRITERIA FOR ACCEPTANCE:</b></p> <ul style="list-style-type: none"><li>❖ A current resident of the State of Idaho.</li><li>❖ Recently honorably discharged from military or a dependent of a veteran who is 100% permanently disabled.</li><li>❖ A Cumulative Grade Point Average of 3.0 (on a 4.0 scale).</li><li>❖ Accepted as a full-time matriculating student at Boise State University.</li><li>❖ Earned at least 26 credits at Boise State University.</li><li>❖ Completed Boise State University Veterans Scholarship Application.</li></ul>
<p><b>PACKET:</b></p> <ul style="list-style-type: none"><li>❖ Completed Boise State University Veterans Scholarship Application.</li><li>❖ A 300 word essay stating qualifications and need for the scholarship.</li><li>❖ One Recommendation Form from an individual who can address the applicant's qualifications for the scholarship.</li></ul>

The entire Application Packet must be returned no later than: March 15th

**e-mail to:** [veterans\\_scholarship@boisestate.edu](mailto:veterans_scholarship@boisestate.edu)

**Or Fax to:** 208/ 426-4312

**Or Mail to:**

Veterans Service Office  
1910 University Drive  
Boise, ID 83725-1300  
Telephone: 208/426-3744

## Instructions and Checklist for Completing Boise State University Veterans Scholarship Application Packet

Task	Completed
<p><b><u>Application Form</u></b></p> <ul style="list-style-type: none"> <li>◆ Complete the official Boise State University Veterans Scholarship Application.</li> </ul>	<input type="checkbox"/>
<p><b><u>Essay</u></b></p> <ul style="list-style-type: none"> <li>◆ A 300 word typed essay. The essay topic stating their need for the Boise State Veterans Scholarship.</li> </ul>	<input type="checkbox"/>
<p><b><u>Recommendations</u></b></p> <ul style="list-style-type: none"> <li>◆ Applicant must complete Section I of the Recommendation Form.</li> <li>◆ Applicants should have one academic instructor or appropriate supervisor/employer complete Section II of the Recommendation Form. These individuals should be able to evaluate the applicant's commitment to school.</li> </ul>	<input type="checkbox"/>

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# Boise State University

## Veterans Scholarship Application

### APPLICANT INFORMATION

Last Name:	First:	M.I.:
Street Address:		Apartment/Unit #
Date of Birth:	Social Security Number:	Student ID:

### EDUCATION

High School:		Address:				
From:	To:	Did you Graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
		Degree:				
College:		Address:				
From:	To:	Did you Graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
		Degree:				
Other:		Address:				
From:	To:	Did you Graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
		Degree:				
Are you a resident of the State of Idaho?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you at least a Sophomore (26 credits) this semester?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	What is your Major?

### REFERENCES

*Please list ONE personal reference, who will complete the Recommendation Form and submit it to BSU on your behalf.*

Name:	Relationship:
Company:	
Phone: (     )     )	Address:
Name:	Relationship:
Company:	
Phone: (     )     )	Address:

# Recommendation Form

## Boise State University Veterans Scholarship

### **SECTION I** – To be completed by applicant.

Name of applicant: \_\_\_\_\_

I  waive  do not waive my right to access information on the Recommendations form.

APPLICANT'S SIGNATURE \_\_\_\_\_

### **SECTION II** – To be completed by an academic instructor, employer/supervisor, or friend.

1. In what capacity and how long have you known the applicant?
2. How firm is the applicant's commitment to his / her proposed field of study?
3. How would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank.

	Excellent	Very Good	Average	Below Average
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seriousness of Purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Please cite specific examples of how the applicant has demonstrated the qualities listed in question 3.

5. Additional comments:

Name: \_\_\_\_\_ Title or Position: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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