NORTHWEST
MISSOURI STATE UNIVERSITY

OFFICE OF SCHOLARSHIPS AND FINANCIAL ASSISTANCE

Northwest Scholarship Petition

Please complete all sections of this form and attach a copy of your degree audit. When complete, submit documents to the Office of Scholarships and Financial Assistance by fax at 660.562.1674, or email at finaid@nwmissouri.edu. The Scholarship Appeals Committee will review your petition and you will be notified of the decision made in 5-10 business days.

_____ _____ _____

Last Name First Name 919 Number

I'm completing this petition form so I may be reconsidered to receive the

_____ scholarship for:

☐ Fall ☐ Spring ☐ Summer term during the _____ academic year.

Expected graduation date: _____

Have you petitioned before? ☐ Yes ☐ No If yes, when? _____

Please explain why you should receive the scholarship you are petitioning for.