Northwest Arkansas Dr. Martin Luther King, Jr. Scholarship

Graduate and Professional School Applicants Application Form

Only emailed applications in Microsoft Office Word format will be accepted. (No PDFs, no scanned docs, no handwritten docs, etc.)

Applicants Name:	Student P id#:
Address:	
City/State/Zip Code: _	
Contact Numbers: H	ome Cell
E-mail	Major:
Classification:	Cumulative College GPA:
-	eted:Expected date of Graduation:
	owing components of the application. Feel free to use additional pages if necessary.
Community Involveme	nt/Organizational Affiliations (25%):
*Your most notable acc	complishment to date:
Leadership Experience	<u>s</u> (25%):

* <u>Long-term Aspirations</u> :	
What aspects of Dr. King's life and legacy do you apply to your every	day life? (<u>150 words or less</u>) (50%)
*This component of the scholarship criteria will also be taken into coscholarship recipients.	nsideration when determining the
By submitting this application to the NWA MLK scholarship commits true and accurate. I understand the giving of any false information recipient of the scholarship. Electronic signatures are sufficient at this time hard copy must be received by the committee within five business days.	will automatically disqualify me as a
Applicant's Signature	Date
Submit application to: nwamlkscholar@yahoo.com	
Emailed applications must be received no later than 5:00pm on Octobe accepted. NO EXCEPTIONS!	ber 30, 2012. Late Applications will not
	Last Update: September 25, 2012