Information for the

EARLE F. LOW SCHOLARSHIP
Established 1971

The Earle F. Low Scholarship is available through the University of Central Missouri Foundation for a senior student pursuing a degree in agriculture. This scholarship is made possible by way of a gift from Mr. and Mrs. Earle F. Low of Sun City, Arizona, to recognize and encourage outstanding academic achievement in the field of agriculture.

BACKGROUND:
This scholarship is named in honor of Earle F. Low, who served for twenty-eight years as a faculty member and chair of the Department of Agriculture at Central Missouri State University. During his tenure he served on numerous state and national committees for the advancement of agriculture education. In addition, he sponsored the CMSU collegiate 4-H Club for many years and was actively involved in many student organizations.

CRITERIA:
To apply, a student must:

a. be a full-time senior student in good academic standing at UCM;
b. be pursuing a degree in agriculture;
c. be worthy, deserving and of good moral character;
d. show promise of leadership, service and academic ability in the field of agriculture.

SELECTION PROCESS:
1. The recipient(s) of the Earle F. Low Scholarship will be recommended by a selection committee designated by the Chair, Department of Agriculture and shall include to faculty members of the Department of Agriculture. Recipient(s) shall be approved by the UCM Scholarships and Awards Officer.

2. The application must be delivered or postmarked by March 1. Recipient(s) shall be announced by May 15 of any given year.

3. The Selection Committee, with the approval of the donor and the Executive Director of the Foundation, will annually establish the number and award amount. If adequate funding is not available, the Selection Committee may exercise the option of making no selection.

APPLICATION DEADLINE:
Applications must be delivered / postmarked by March 1 to:
Department of Agriculture
Attn: Earle F. Low Scholarship
University of Central Missouri
Grinstead 126
Warrensburg, Missouri 64093

-- Keep information pages of this scholarship application for your reference --
Application for the
EARLE F. LOW SCHOLARSHIP

1. Name ____________________________ UCM student ID# ____________________________

2. Permanent address ____________________________________________________________________________
   street
   ____________________________________________________________________________________________
   city                                                     state                                zip code                                                        county

3. Home phone (   ) _______________ Cell phone (   ) _______________ Campus phone ________________

4. Campus address ____________________________ E-mail ____________________________

5. Major ____________________________ Minor ____________________________

6. Cumulative GPA ____________________________ GPA in major ____________________________

7. Estimated date of graduation/degree completion _____________________________________________
   month                                                   year

8. Attach a list of campus and community organizations to which you belong. Be sure to list leadership roles
   when applicable.

9. Attach a brief statement of your professional goals as they relate to this scholarship. Be sure to include
   your plans and aspirations for the future.

10. Attach a current transcript. An unofficial transcript may be printed (free of charge) from the student
    portal at https://www.ucmo.edu/portal.

REFERENCES:

1. Name ____________________________ Relationship ____________________________
   Phone Number ____________________________ E-mail ____________________________

2. Name ____________________________ Relationship ____________________________
   Phone Number ____________________________ E-mail ____________________________
UNDERSTANDING OF ACCEPTANCE:

If I am selected as a recipient of this scholarship, I understand that I must meet the criteria as outlined in this application at the beginning of the semester in which the scholarship is to be applied to my student account. If my status should change before/during the academic year, I understand that I must notify the Department to which this application has been submitted. I further understand that a change in my status may affect my eligibility and the application of the scholarship to my student account.

__________________________________________________ _________________________________
Signature             Date

Applications must be delivered / postmarked by March 1 to:
Department of Agriculture • UCM • Grinstead 126 • Warrensburg, MO 64093