

## 2019-20 SCHOOL YEAR

### ASMSU Billings CHILD CARE SCHOLARSHIP APPLICATION

- March 15, 2019      **DEADLINE TO APPLY FOR SCHOLARSHIP.** All your paperwork must be turned in at the ASMSU Billings office, room 213 of the SUB by 5:00 p.m. on this date. **NO APPLICATIONS WILL BE ACCEPTED AFTER THIS DATE.**
- April 8-12, 2019      The ASMSU Billings Childcare Scholarship Committee will meet to determine the recipients of the scholarships. (The committee is composed of 2 Student Senators, a representative from the Financial Aid Office, and a Senate advisor).
- April 22-26, 2019      Letters will be sent to **all applicants** of the ASMSU Billings Childcare Scholarships letting them know **if they did or did not receive a scholarship.**

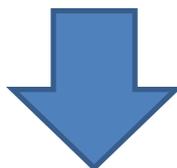
**ALL APPLICATIONS MUST BE TYPED- GO TO:**

Website: <http://www.msubillings.edu/asmsub>

RETURN FORMS TO:      ASMSUB STUDENT GOVERNMENT  
STUDENT UNION BLDG., ROOM 213  
657-2365

**LETTER OF RECOMMENDATION- GO TO:**

[www.msubillings.edu/asmsub/recommendations](http://www.msubillings.edu/asmsub/recommendations)



# REQUIREMENTS FOR ASMSU Billings CHILDCARE SCHOLARSHIPS

## General Information

- The amount of each scholarship is \$500 for fall semester and \$500 for spring semester.(tentative upon budget approval).
- A committee consisting of ASMSU Billings Senators, the Senate Advisor, and a representative from the Financial Aid Office will determine scholarship recipients. Their decision **is final**.
- You apply for a scholarship fall semester, and if you are selected to receive the fall semester scholarship, you will automatically receive a scholarship for spring semester for the same amount (provided you still meet the required qualifications.)

## Requirements

1. You must be a full-time student at MSU Billings and have paid the Student Activity Fee.
2. You must have been a full-time student (12 credits undergraduate or 9 credits graduate) at MSU Billings for at least one semester before you apply. **Being enrolled in the current semester for the first time does NOT count.**
3. You must have a current cumulative GPA of a 2.5 and maintain a 2.5 cumulative GPA.
4. Students with zero unmet need will also be eligible for scholarships; however, funding for these students will go toward the reduction of their student loans, if applicable. This will be determined by the Financial Aid Office.

## PROCEDURE TO FOLLOW WHEN APPLYING FOR ASMSU BILLINGS CHILDCARE SCHOLARSHIPS

You must make up a packet of materials and bring it to the ASMSU Billings Student Government Office, room 213 of the SUB by the deadline date. The packet of materials needs to include items 1-5 listed below.

**YOU NEED TO INCLUDE ALL THESE ITEMS IN ORDER TO BE CONSIDERED FOR A SCHOLARSHIP.**

- \_\_\_ 1. A form letter from you (included in this packet) indicating the number of children you have and their ages; the letter should also demonstrate your financial need; list all other child care assistance you receive from any source. (Preference will be given to those applicants who do not receive other child care assistance.)
- \_\_\_ 2. Fill out the ASMSU Billings Scholarship Application Form (included in this packet.) or online at: ([www.msubillings.edu/asmsub](http://www.msubillings.edu/asmsub)) click on "applications".
- \_\_\_ 3. A working copy of your transcript. (This can be obtained off the Internet by going to the MSU Billings homepage ([www.msubillings.edu](http://www.msubillings.edu)) and clicking on "Instructions for accessing student grades and unofficial transcripts.")
- \_\_\_ 4. A copy of your award letter for financial aid. If you do not have a copy of this letter, please go to the Financial Aid Office and ask them to make a copy of the "Award Screen" printed off of "Roarman" in Banner.
- \_\_\_ 5. At least two (2) letters of recommendation from someone **not related to you** that knows of your financial need. ([www.msubillings.edu/asmsub/recommendations](http://www.msubillings.edu/asmsub/recommendations))

**NOTE: THESE SCHOLARSHIPS MAY BE USED TO PAY CHILDCARE EXPENSES AT ALL OFF CAMPUS DAYCARES OR BABY SITTER OF YOUR CHOICE.**

**ASMSU BILLINGS  
CHILD CARE SCHOLARSHIP APPLICATION**

Name \_\_\_\_\_

School I.D. \_\_\_\_\_

Current Mailing Address \_\_\_\_\_  
city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Email Address \_\_\_\_\_

(check one)

University campus \_\_\_\_\_ CC campus \_\_\_\_\_

Number of credits you are enrolled in.

\_\_\_\_\_ 12 or more(Undergraduate)  
\_\_\_\_\_ 9 or more(Graduate)

Your major \_\_\_\_\_ minor \_\_\_\_\_

MSUB cumulative GPA \_\_\_\_\_ (must be 2.50 or above)

To the best of my knowledge, the above information is correct.

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Signature of applicant

Date

**PLEASE USE THIS FORM TO WRITE YOUR PERSONAL LETTER  
OR ATTACH A LETTER.**

<b>Parents' Names:</b> _____			
<b>Mother</b> _____		<b>Father</b> _____	
<b>Child's Name</b>	<b>Age</b>	<b>Child's Name</b>	<b>Age</b>

**Don't forget to include in your packet the required items # 1-5  
on page 2 of the Scholarship Application Form.**