NORTHEASTERN OHIO TREASURY MANAGEMENT ASSOCIATION Scholarship Application Form

PERSONAL INFORMA Name						
Address						
City, State, Zip						
Phone						
NEOTMA Member? Yes	s No					
NEOTMA Immediate Family Member? Yes No						
ACADEMIC INFORMA	TION					
Type of Student	Graduate	Underg	raduate	Full Time	Part Time	
Course of Study						
Name of School						
Year of Graduation						
Overall GPA						
Major GPA						
			_			
List of Major Courses						
	<u>-</u> -					
I certify that the above inform covered by my employer or I					n is not completely	
		·	·	u to be repaid.		
Signed			Date			
NEOTMA Use Only Mail completed application to:				-		
NEOTMA Dues			NEOTMA Scholarship Committee			
School Approved GPA Verified			P.O. Box 31215			
SPA Verified			Independence, Ohio 44131 Must be postmarked by August 31, 2015			