

**DUE- January 30, 2015, 5:00 p.m.**



# THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,  
AND ENVIRONMENTAL SCIENCES

## APPLICATION FORM RAYMOND A. MILLER COUNCIL SCHOLARSHIP

Environmental Sciences Student Council sponsors two \$250.00 scholarships to members of Council who have shown dedication to Council projects.

These scholarships are named in honor of the late Dr. Raymond A. Miller, former Assistant Dean for Student Affairs in the College of Food, Agricultural, and Environmental Sciences, who served as advisor for the College Student Council and the Recognition Program for more than 20 years. For more than 30 years Dr. Miller was a mentor, friend, and advisor to countless students, touching every corner of student life with his energy, enthusiasm and commitment to the College and to Ohio State.

Guidelines for selection are as follows:

- Contribution to the College of Food, Agricultural, and Environmental Sciences Student Council.
- Leadership roles and responsibilities in other campus organizations.
- Amount of scholarship aid already received will be considered if needed.
- Work experience during the year will also be considered only to establish the percentage of time that the applicant devotes to Student Council.
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The advisors to Student Council, along with the Selections Committee, shall review all applications and choose the most qualified recipient, based upon contributions to and involvement in Student Council programs.

All scholarship applications are due by **January 30, 2015**. Announcements of the recipients will be made at the College Recognition Program on April 16, 2015. **All applicants are expected to be present at the Recognition Program.**

**Name:** \_\_\_\_\_  
Last | First Middle

**Columbus Address:** \_\_\_\_\_  
Street City State Zip

**Columbus Phone:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_  
Street City State Zip

**Permanent Phone:** \_\_\_\_\_ **Number of Year on CFAES Student Council:** \_\_\_\_\_

**College of Enrollment:** \_\_\_\_\_

**Major:** \_\_\_\_\_ **Minor:** \_\_\_\_\_

**Date of Intended Graduation:** \_\_\_\_\_ **Total Hrs. Earned by end of Autumn 2013:** \_\_\_\_\_  
Semester Year

**Organization You Represent This Year:** \_\_\_\_\_

***Print a copy of your completed application form, for your records, prior to submission***

**IMPORTANT:** 1.) **Save this application form to your computer** before starting to complete. 2.) After saving the document on your computer, open that copy of the document file. 3.) Complete the form. **You MUST use Adobe Reader when completing this form** (Apple users: DO NOT use "Preview" for completing this form for submission). Remember to save a copy of your completed form for your records. 4.) Attach a copy of your completed and saved application form to an email to [trefz.2@osu.edu](mailto:trefz.2@osu.edu).

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**List offices held, committees served on and what you did on those committees, or activities that you helped with on CFAES Student Council. *(maximum response limit is 775 characters)***

**What other offices have you held or what organizations/activities have you been involved in while at Ohio State? *(maximum response limit is 575 characters)***

**List your work experience during this past year of Student Council involvement starting with the most recent. *(maximum response limit is 775 characters)***

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**Why should you be the recipient of this scholarship?** *(maximum response limit is 2,125 characters)*

Large empty gray box for the scholarship response.

**NOMINATIONS ARE DUE  
FRIDAY, JANUARY 30, 2015 BY 5:00 P.M.  
to [trefz.2@osu.edu](mailto:trefz.2@osu.edu).**

**QUESTIONS?** Contact Dr. Marilyn Trefz at 614-915-1150 or [trefz.2@osu.edu](mailto:trefz.2@osu.edu).

**APPROVAL FOR RELEASE OF INFORMATION:**

By submitting this completed applications form, I authorize the release of the information on this form to the Selection Committee. I also affirm all information provided in this form is an accurate assessment of my participation and level of responsibility in the activities.

**REQUIRED**

Click check-box to agree

Date: \_\_\_\_\_

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