

Missouri Bow Hunters Association Paul Jeffries Scholarship

Application

Please type or print and submit application to:

Missouri Bow Hunters Association, P.O. Box 47352, Kansas City, MO 64188 Completed applications must by postmarked or submitted electronically by March 1st. 2014

Last Name	First Nar	me	MI Date of Bi	irth	
Address		City	StateZ	ip	
Phone	oneAlternate PhoneEmail				
Name and address	s of the school you currently at	tend. Please includ	e year you plan to gradua	ate:	
	School, please indicate the coll us you will be attending:	ege you have tentat	ively selected and includ	le the City and	
What is your inter	nded major course of study				
Are you a current	MBH Member? If yes, wh	nen did you first join	MBH?		
	er organizations/memberships		e to		
	<i>tach one page if additional spa</i> /present archery related	ce is required to an	swer the following questi	ions:	
	interests (excluding				
	ments or information that you				
-	e names and contact informatio		ferences: (NO family men	nbers,	

I confirm that all information submitted on this Scholarship Application form is correct to the best of my knowledge. Applicant Signature: _____ Date: _____ Date: _____

Parent/Guardian Signature: _____ Date:_____

Parent or Guardian must sign for all applicants under the age of 18