



OKLAHOMA GAS ASSOCIATION SCHOLARSHIP APPLICATION

Type Information

APPLICANT: Applicant must be a High School Senior with a 3.0 or higher GPA.

| | | |
|------------------------------|--------------------|----------------|
| NAME (LAST) (FIRST) (MIDDLE) | | |
| ADDRESS (City) (State) (Zip) | | |
| BIRTHDATE (mm/dd/yyyy) | HOME TELEPHONE () | CELL PHONE () |
| E-MAIL ADDRESS | | |

EDUCATION: (You may use another sheet to list your information or type it in the box below. Please attach transcripts.)

| | | | |
|---|-----------------|--------------------|------------|
| HIGH SCHOOL | GRADUATION DATE | GPA scale of _____ | CLASS RANK |
| | | GPA | # OF |
| ADDRESS (City) (State) (Zip) | | | |
| SELECTED COLLEGE / UNIVERSITY OR TECHNICAL SCHOOL | PHONE NUMBER | HOURS COMPLETED | |
| ADDRESS (City) (State) (Zip) | | | |
| DEGREE / COURSE OF STUDY | | | |

PARENT /GRANDPARENT/GUARDIAN & OGA MEMBER COMPANY :

| | | |
|--------------------------------------|----------------------|--|
| NAME (LAST) (FIRST) (MIDDLE) | | |
| RELATIONSHIP TO APPLICANT | | |
| OGA MEMBER COMPANY (EMPLOYER) | OFFICE TELEPHONE () | |
| COMPANY ADDRESS (CITY) (STATE) (ZIP) | SUPERVISOR | |
| E-MAIL ADDRESS | | |

To the best of our knowledge, the information provided in this application and essay is accurate. We understand that any material misrepresentation of information given shall serve to disqualify the application and essay.

| | |
|--|------|
| APPLICANT SIGNATURE | DATE |
| MEMBER COMPANY PARENT / GRANDPARENT / GUARDIAN SIGNATURE | DATE |

Please submit a complete application packet. Incomplete packets will not be considered.