Mahoning Valley Powers

Scholarship Application / Nomination

Youngstown State University

This application must be received by Dec. 1, 2017 to:

Youngstown State University
Office of Financial Aid & Scholarships
One University Plaza
Youngstown, OH 44555

Applicant Section: Home Phone (_____) _____

Name _____ Banner ID# _____

Address _____

(Number and Street) (City) (County) (State) (Zip)

Have you applied for admission to Youngstown State University? Yes__ No__

Will you complete the Free Application for Federal Student Aid? Yes__ No__

Are you receiving any other scholarships? Yes__ No__

If yes, list_____

In signing this application, I agree to the release of financial as well as academic information to representatives of the Powers Trust.

Signature of Applicant _____ **Date** _____

High School Section: (please print)

School Counselor _____ Phone _____

Name of High School _____

Statement of Recommendation _____

_____

_____

_____

Signature of Counselor _____ **Date** _____