



Non-Resident Scholarship Application Form

This form is **ONLY** for students who have **EXHAUSTED** their VA Education Benefits while attending the University of Mississippi.

This form must be completed **EACH TERM** you wish to receive the scholarship. Please **TYPE** this form. Email to VMS at veterans@olemiss.edu.

First Name

Last Name

Student ID

Student Email

Term

Year

By signing below, I acknowledge:

- This scholarship is available only to students who have utilized VA Education Benefits at the University of Mississippi and have been continuously enrolled (Fall and Spring) after exhausting their benefits
- I am responsible for completing this form **EACH TERM** I wish to receive this scholarship
- The School Certifying Official must approve all applications

Student Signature:

Date:

Office Use Only

Certifying Official: Verify the exhausted file/transcript, approve, and submit.

Submitted Term(s): _____ Circle: Dependent Veteran

Approved: _____ Date: _____

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The Office of Veteran & Military Services

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