

SCHOLARSHIP APPLICATION

Petroleum Land Management Program Oklahoma City University

PERSONAL INFORMATION (Please use your legal name)						
Last Name			First Name			MI
Birth Date (MM/DD/YY)						
Street Address			City/State/Zip			
Preferred Phone (home/work/cell)() (circle one)			_ Email			
Highest year of school con	npleted:	GED □HS I	Diploma 🔲	College Degr	ree 🔲 Ot	her
EDUCATIONAL AND P	ROFESSIC	<u>ONAL TRAIN</u>	<u>ING</u>			
Please list, in order of atter	ndance, all	educational inst	itutions atten	ded. Transcri	pt require	d.
Name of Institution		City, State	From Date	To Date	Degree/Certification	
CURRENT AND PAST F						D
Dates of Employment		Company N	Iame, City, Stat	e		Position

Why are you pursuing a career in the oil and natural gas industry?	
What are your plans upon receiving your certification?	
Please state your need for financial assistance.	
SCHOLARSHIP GUIDELINES	
• Applicant must be a current resident of the state of Oklahoma.	
 Applicant must be enrolled in Oklahoma City University's Petroleum Land Man 	agement Program.
 Applicant should have a sufficient need for financial assistance. 	
• Applicant must provide a high school or college transcript with this application.	
SUBMIT APPLICATION/QUESTIONS	
OERB	
500 NE 4th St., Suite 100	
Oklahoma City, OK 73104	
scholarships@oerb.com	
Phone: 800-664-1301	
Fax: 405-942-3435	
Applicant's Signature	Date