



Lawrence Murray Scholarship Application

2026-2027 Academic Year

Deadline for Submission: June 30, 2026

SCHOLARSHIP TYPE

CHOOSE ONE

- Vocational
- Undergraduate
- Graduate

FUNDING OPTIONS

CHOOSE ONE

- Option A: Full Award Fall 2026
- Option B: Split Fall 2026/Spring 2027

PERSONAL INFORMATION

Full Name: _____
Last Name _____ First Name _____ Middle Initial _____

Mailing Address: _____
Street or P.O. Box _____

City _____ State _____ Zip Code _____

Phone Number: _____

Email Address: _____

Last 4 Social Security Number: _____

Date of Birth (MM/DD/YYYY): _____

ITO Enrollment Number: _____

EDUCATION DETAILS

Name of Vocational School/College/University: _____

Location (City, State) _____ Field of Study/Major: _____

College Classification for Next Term (check one, if applicable):

- Freshman
- Sophomore
- Junior
- Senior
- Graduate

Anticipated Graduation Date (MM/YYYY): _____



Lawrence Murray Scholarship Application

2026-2027 Academic Year

Deadline for Submission: June 30, 2026

HONORS & AWARDS

(Optional: Attach a separate sheet if applicable)

Honor/Award Name	Description	Date Received (MM/YYYY):
------------------	-------------	--------------------------

Honor/Award Name	Description	Date Received (MM/YYYY):
------------------	-------------	--------------------------

REQUIRED DOCUMENTS

Please submit all required documents with your application. Incomplete applications will not be accepted.

- Official Transcript(s)
- Photograph (small color, 3x5 or digital sent via email)
- Tribal Membership Card (Copy)
- Letter of Acceptance
- Recommendation Letter
- Essay (Minimum 300 words)
"How does your education support a future career in a tribal gaming industry."

STUDENT AFFIRMATION

I affirm that the information provided in this application is true and accurate to the best of my knowledge. I consent that if selected as a scholarship recipient, my picture may be used to promote the Lawrence Murray Scholarship program. I understand that incomplete applications may result in disqualification.

Printed Name:	Signature:	Date:
---------------	------------	-------

SUBMISSION INSTRUCTIONS

Please mail your completed application and all required supporting documents to:

Iowa Tribe of Oklahoma Higher Education Department, 335588 E. 750 Rd. Perkins, OK 74059

Or email your completed application in PDF format to:

rriley@iowanation.org

OFFICIAL USE ONLY

Date Received:	Date Postmarked:
----------------	------------------

Qualification Complete: Yes No

Application Complete: Yes No

Reviewed By:

Date Reviewed: