

ALUMNI ASSOCIATION SCHOLARSHIP APPLICATION

This award is based on academic achievement and university/community involvement. Students must complete the application process in order to be considered.

(please print clearly)		
Name:	ID#	
Street address:		
City:	State: Zip:	
Contact phone number (cell, home, residence ha	all):	
Email address:		
Are you a commuter?Yes NoDo you live on campus?Yes No	_ Do you have a FT/PT job? Yes _ _ Are you a Veteran? Yes _	No No
Major:	Academic School:	
Estimated graduation date: Total credits accumulated as of 1/1/2019:		
GPA:	Total transfer credits:	
Please type your responses to the follow Note: When using acronyms, please write out full name upor		ו).
	S INVOLVEMENT eived while at WCSU. (Use bulleted or numeric li	st, no
	ions, etc., that indicate your level of involvement bulleted or numeric list, no paragraphs.)	at WCSU

COMMUNITY INVOLVEMENT

 List community volunteer activities outside of academic requirements while attending WCSU. (Use bulleted or numeric list)

PERSONAL ESSAY

4. This scholarship is based on academic achievement and any university/community involvement. With this in mind, please inform the committee, in a short narrative, (250 words) why you should receive this award.

I hereby acknowledge that the information submitted is accurate and complete to the best of my knowledge and that any misrepresentation of information will result in repayment of the total scholarship.

Signature_

Date

This application form and a copy of your current unofficial transcript must be submitted together by 4 p.m. on Friday, Feb. 22, 2019, to the Alumni Office, Old Main, Suite 302. Late or incomplete submissions will not be accepted.