

The Robert Rees Scholarship Fund Application

2011-2012

The Robert Rees Scholarship is awarded to students who have maintained a cumulative grade point average of at least a 3.0, are **Gallia County graduating seniors** that have placed in the upper fourth of their class, and demonstrates a financial aid need. **Jackson County nursing students** may also qualify for funding.

Returning students must reapply each year for consideration of continuance. This scholarship is awarded as funds are available. Scholarship applicants **must** complete this process for consideration for the scholarship from the Robert Rees Scholarship Fund at the University of Rio Grande.

Application instructions/stipulations:

1. Complete the Free Application for Federal Student Aid (FAFSA) by March 15, 2011. Determination of your financial need must be known prior to scholarship consideration.

2. Complete the student information section of the application, and then submit it to:

**University of Rio Grande
Financial Aid Office-F25
P.O. Box 500
Rio Grande, Ohio 45674
Fax: 740-245-7102**

3. Freshman candidates: **MUST** submit a photograph with their application **AND** complete the University of Rio Grande's application for admission process. Returning candidates: are only required to submit an annual application to the financial aid office.

PLEASE NOTE: The application deadline is April 1, 2011

Robert Rees Scholarship Application

Student Information

Applicant Name _____ Student ID#: _____

Address _____

Telephone _____ County of Residence _____

Academic Major _____ Minor _____

Two Year Degree _____ Four Year Degree _____ Expected Graduation Date: _____

High School _____

Parents/Guardians _____

University and Community Activities _____

Special Interest, Talents, Honors and Recognitions _____

Unusual items of expense or special circumstance which the scholarship committee should consider _____

Professional Goals _____

I certify that the information reported on this form is complete and true to the best of my knowledge, and I authorize the release of information to news agencies should I be selected to receive scholarship monies.

Applicant's Signature _____ Date _____

University Information

CUM G.P.A. _____ TOTAL HOURS EARNED _____ CURRENT HOURS ATTEMPTED _____

Authorized Signature _____

Title _____