University Women's Club
Deadline: March 25, 2011

STUDENT INFORMATION:

1. NAME: _____
   LAST FIRST M.I. MAIDEN

2. MAILING ADDRESS: _____
   STREET ADDRESS CITY COUNTY STATE ZIP

3. CAMPUS BOX: _____ STUDENT ID#: _____ SOCIAL SECURITY #: _____

4. PHONE NUMBER WHERE YOU CAN BE REACHED: _____ ANTICIPATED GRADUATION DATE _____
   MONTH, DAY, YEAR

5. MAJOR? _____ MINOR? _____

6. LIST YOUR ACTIVITIES, PROFESSIONAL AFFILIATIONS, ETC. IN WHICH YOU ARE INVOLVED: _____
   _____

7. ARE YOU A MEMBER OF A GREEK ORGANIZATION? ___ WHICH ONE? _____

8. ARE YOU INVOLVED WITH THE FINE AND PERFORMING ARTS ON CAMPUS? IF YES, PLEASE LIST: _____
   _____

9. LIST ANY JOBS YOU HAVE HELD, BOTH ON AND OFF CAMPUS: _____
   _____

10. IF YOU HAVE ANY UNUSUAL ITEMS OF EXPENSE OR SPECIAL FAMILY CIRCUMSTANCES WHICH THE SCHOLARSHIP COMMITTEE SHOULD TAKE INTO CONSIDERATION, PLEASE EXPLAIN THEM. (I.E. DENNEY SCHOLARSHIP DESCENDANTS, GALLIPOLIS JAYCEES DESCENDANTS, ETC.)
    _____

11. ARE YOU PRESENTLY RECEIVING ANY SCHOLARSHIPS OR INSTITUTIONAL GRANTS FROM THE UNIVERSITY OF RIO GRANDE? IF YES, PLEASE LIST NAME(S).
    _____

12. DID YOUR PARENT(S) OR GRANDPARENT(S) GRADUATE FROM THE UNIVERSITY OF RIO GRANDE? IF YES, PLEASE LIST NAME(S).
    _____

13. PLEASE DISCUSS ON A SEPARATE SHEET IN SEVERAL PARAGRAPHS, WHY YOU HAVE SELECTED YOUR MAJOR FIELD OF STUDY AND WHAT PROFESSIONAL GOALS YOU HAVE SET FOR YOURSELF. (TYPED)

I CERTIFY THAT THE INFORMATION ON THIS FORM IS COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE, AND I AUTHORIZE THE RELEASE OF INFORMATION TO NEW AGENCIES SHOULD I BE SELECTED TO RECEIVE SCHOLARSHIP MONIES.

APPLICANT'S SIGNATURE _____ DATE _____

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OFFICE USE ONLY

COLLEGE CODE _____ CUM HOURS _____ CUM GPA _____

BUDGET _____ EFC _____ FA _____ NEED _____