



continued:

Institution Attended \_\_\_\_\_ Field of Study \_\_\_\_\_  
Credits/Degree Earned \_\_\_\_\_  
Year(s) Attended \_\_\_\_\_

Institution Attended \_\_\_\_\_ Field of Study \_\_\_\_\_  
Credits/Degree Earned \_\_\_\_\_  
Year(s) Attended \_\_\_\_\_

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### **Institutional Information**

6. List Current/Accepted for Enrollment Accredited Institution

Accredited Institution \_\_\_\_\_

Address: \_\_\_\_\_  
Number and Street

\_\_\_\_\_  
City State Zip E-mail

Individual Contact: \_\_\_\_\_

Telephone Contact: \_\_\_\_\_

Field of Study: \_\_\_\_\_

Start Date: \_\_\_\_\_ Projected Date of Graduation: \_\_\_\_\_

**CERTIFICATION ALL APPLICANTS:** I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form, my transcripts, and any additional supporting documentation submitted as part of this application. I give permission for selection committees to contact high school and/or college officials for additional academic information. **If chosen for scholarship award, I agree to provide proof of GPA to the committee at each semester/quarter break in order for the committee to determine future eligibility.**

Applicant Name (Printed) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Attachments Required:

1. Academic Records
2. Demonstration of Financial Need
3. Personal or Family Circumstances as Applicable
4. Statement of Career Goals and Objectives
5. Documentation of School and Community Activities
6. References