



ALUMNI ASSOCIATION GRADUATE AWARD

The award is based on academic achievement and financial need. Only graduate students will be considered. 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 hall): _____

Email address: _____

Major: _____ Academic School: _____
Ancell, Arts & Sciences, Professional Studies, Visual & Performing Arts

Estimated graduation date: _____

Total credits accumulated as of 1/1/2017: _____ Total credits earned at WCSU: _____

Total GPA for credits earned at WCSU: _____ Total transfer credits: _____

(Please type your responses to the following and attach to this application)

Note: When using acronyms, please write out full name upon first reference (e.g. SGA: Student Government Association).

ACTIVITIES

1. List any awards, honors, career accomplishments, community service, volunteer activities, etc. (Use bulleted or numeric lists, no paragraphs.)

PERSONAL ESSAY

2. Please inform the committee, in a short narrative (up to 250 words), why you should be considered.

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. 24, 2017, to the Alumni Office, Old Main, Suite 302. Late or incomplete submissions will not be accepted.