

Scholarship Application Form

Please select which scholarship(s) you are applying for:

- ___ Ruby Taylor (scholarship for a current sophomore woman who will be a Junior in the Fall semester)
___ Employee Child (Scholarship for a child of Full Time ISU Employee)
___ College of Technology (Scholarship for College of Technology Students)

I. PERSONAL INFORMATION

- 1. Mr./Ms. (Last) (First) (Middle or Maiden)
2. Address: (Number and Street) (City) (State) (Zip)
3. Phone number: 4. Birthdate:
5. Bengal Card#: 6. Marital Status: ()unmarried, ()married, ()separated
7. Major or program of study:
8. Expected date of graduation: 9. Expected degree:
10. How many credits have you completed as of the date of this application:
11. Current number of credits enrolled in for the present ISU semester:
12. If required, state here the name of your parent who is a current full-time employee of ISU and the department where the parent is employed:

II. STATEMENT BY APPLICANT: On an additional sheet of paper, make a statement of your educational aims, chosen career, plans for accomplishment and any other information you consider to be pertinent. Please be aware that strong emphasis is put by the selection committee on this section of the application.

III. TRANSCRIPTS: Include with this application a copy of your most recent ISU transcript including a class schedule of courses currently enrolled in (unofficial copy is acceptable).

CERTIFICATION: I hereby certify, that to the best of my knowledge, all information submitted for this scholarship is complete and correct. I authorize the Scholarship Office at Idaho State University to obtain such additional information concerning my educational program and financial circumstances as are needed to consider me for this scholarship. I also authorize Idaho State University the right to release information, which is pertinent to this application, to others involved in providing funds related to my education. I further authorize Idaho State University to include my name when appropriate in the lists of winners to be publicized in the news media.

(Signature)

(Date)

Office Use Only

GPA Class Level #Cr. Fall #Cr. Spring
Major Completed # of Credits EFC
Parent Requirement: SO Requirement: COT Requirement: