ASPE SCHOLARSHIP APPLICATION

Application must be legible-please print or type DATE:_____

Name:_____

Home Phone:_____

E-Mail:_____

Mailing Address:_____

Date of Birth:_____ MartialStatus:_____

High School:_____ Date of Graduation:_____

College or University:_____

Address:_____

Your degree program:_____

Your current academic rank i.e. Sophmore,Junior,etc:_____

Expected month and year of graduation:_____

Information about your College/University-

Major Dept: _____
Current course load hrs/semester: _____
Cumulative grade point average: _____
GPA based on (A=4.0,etc.) : _____

Extracurricular activities-

Please list any special awards or honors you have received:_____

_____

_____

_____

_____

Please list any clubs or organizations you belong to:_____

_____

_____

_____

Please describe any other extracurricular activities in which you participate:_____

_____

Please state why you have chosen your particular field of study & indicate your future career goals :

I certify that the information provided in this application is correct, and as complete as possible at the time of submittal.

Applicant's signature Date

(Don't forget to attach transcripts, employment history and recommendation letters.)