



Scholarship Application

Select a type: ___Scholarship___Hardship

STUDENT INFORMATION

First Name _____ Middle Name _____ Last Name _____
Address _____ City _____ Zip Code _____
Mobile Telephone _____ Email _____

PARENT/GUARDIAN INFORMATION

First Name _____ Last Name _____
Address _____ Mobile Telephone _____
Email _____

EDUCATIONAL INFORMATION *(high school information required for incoming freshman - ONLY)*

High School _____
City _____ State _____ Zip _____
GPA _____ ACT Score _____ SAT Score _____ Intended Major _____

SU Banner ID _____ SU email _____
Scholarship Enrollment Semester: ___ Fall ___ Spring Year (YYYY)___
Intended Graduation Semester: ___ Fall ___ Spring Year (YYYY)___
Major _____ Classification _____ GPA _____

CERTIFICATION AND RELEASE

I hereby certify that all information in this application is true and accurate. I am aware that any misrepresentation will result in the disqualification of my application or revocation of any awards. I fully understand that scholarship recipients must attend Southern University. I give Central Texas Chapter - Southern University Alumni permission to publicize my scholarship award and photograph in any publication or announcements.

Signature of Applicant

Date

I hereby certify that I have read this application and that the minor applicant has my permission to apply for this scholarship.

Signature of Parent/Guardian *(if student is younger than 18)*

Date