

University of Arkansas at Monticello

Application for Private Scholarships

Currently Enrolled Students

READ COMPLETE APPLICATION CAREFULLY

Instructions to Applicant: This is the official application for all private scholarships available for any UAM student. Return to the Office of Admissions, Harris Hall, Room 120 or mail to Chair, Scholarship Committee, PO Box 3600, Monticello, AR 71656 or fax to 870-460-1926 by **March 1 yearly for consideration in upcoming academic year.**

Name: _____

Mailing Address: _____ City _____ State _____ Zip _____

Telephone Number:(_____) _____ Cell Phone Number:(_____) _____

Student ID Number: _____

Email Address: _____

High School Attended: _____

Have you attended another institution of higher education? Yes _____ No _____

Provide the name of your former college(s) and the year(s) attended.

Classification: _____ GPA: _____

Are you or any member of your family a veteran or a member of the national guard? Yes _____ No _____

Major or field of study: _____

If you are an education major, have you been accepted to the teacher education program? Yes _____ No _____

Have you passed PRAXIS I? Yes _____ No _____ PRAXIS II? Yes _____ No _____

Semester and year you initially enrolled at UAM: _____

Please provide a statement of need for requesting scholarship assistance: _____

Applicant Signature

Date

By signing this application, I fully understand the following:

No private scholarship is awarded to a student who does not have a minimum 2.00 GPA or full-time status. Specific awards may have additional criteria. Must check campus email for information regarding notification of award. No incomplete application will be reviewed.

Revised 11-08-2011