

University of Louisville Alumni Association Scholarship Application

Name:

Street:

City: State: ZIP:

Date of Birth: High School:

E-mail:

Phone:

Status: New Student Current Student Student ID #:

Intended/Current Major:

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

Raymond A. Kent-Navy V12/ROTC Scholarship
Required—Name of individual you are direct descendent of:

Outstanding Undergraduate (SOAR)

Beth K. Fields Scholarship
Required—Number of dependents who currently live with and receive more than half of their support from you:

H
you received one of the alumni scholarships in the past? Yes No
If so, please list which scholarship you received and the year(s) you received it:

Financial aid or scholarships you are will receive in the _____ school year (if applicable):

Certificate and Release Information: I certify that all of the information on this form is accurate and complete to the best of my knowledge. In accordance with the University of Louisville Student Records Policy, I grant permission for information regarding my grades to be provided to the Selection Committee. My signature below indicates that I authorize this release of grades and other academic credentials to the Selection Committee.

Signature: _____ Date: _____

The following must be included with this completed application:

- Resume or list of school, community and civic activities
- Two letters of recommendation (One must be from a professor or teacher; the other may be from an employer, community leader, friend or relative.)
- 300-word essay on the following topic: = - # ' U ' O ' ' @ ' = -
u ' how you see yourself c ' this challenge while at UofL.

For requirements and more information about these scholarships, please visit uofl.alumni.org
If you have any questions, please contact Jennifer Pence at 502-852-4956 or jennifer.pence@louisville.edu.

All applications must be postmarked by March 15.

Mail all materials to:
Jennifer Pence
Office of Admissions
University of Louisville
Louisville, KY 40292