



## OU ALUMNI CLUB SCHOLARSHIP APPLICATION

### *Personal Information*

Name (last, first, middle initial) \_\_\_\_\_  Male  Female

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home telephone number \_\_\_\_\_ Social Security Number \_\_\_\_\_

Names of parents or guardians \_\_\_\_\_

I have applied to OU  Yes  No I have been admitted  Yes  No

I have applied for financial aid  Yes  No

I have been awarded financial aid or other scholarships  Yes  No Award Amount \$ \_\_\_\_\_

**NOTE:** The receipt of financial aid or another scholarship does not disqualify you from receiving this scholarship; however preference will be given to applicants who have not received major scholarships, such as the National Merit Award.

### *Test Results and Academic Standing*

#### **High School Student**

H.S. (current) \_\_\_\_\_

ACT/SAT \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Grade Scale (if other than 4.0) \_\_\_\_\_

High School class rank \_\_\_\_\_ High School class size \_\_\_\_\_

Planned college major \_\_\_\_\_

#### **Current OU Student/New Transfer**

College (if not OU) \_\_\_\_\_

GPA \_\_\_\_\_

Total Hours Completed \_\_\_\_\_

Major \_\_\_\_\_

Expected date of graduation \_\_\_\_\_

### **USE SEPARATE SHEETS OF PAPER FOR THE FOLLOWING:**

**Personal Achievements:** Please tell us about your goals, interest, hobbies, concerns and expectations for the future.

**Honors and Activities:** Please list all elective offices that you have held and the dates of service, extracurricular activities, honors received in high school and any community service.

**Financial Need:** Need is not the only factor in awarding this scholarship. However, need will be considered in weighing the merits of applications of similar qualifications. If you wish to have need considered as part of your application, please be as specific as possible in your explanation.

**Personal Recommendations:** You may attach up to three (3) recommendations from unrelated persons who know you well, for example, principal, teacher, advisor, pastor, employer or community leader.

Place application with your documentation and certified high school transcript in an envelope and mail to:

NAME: Scholarship Chair, OU Club of Wisconsin

ADDRESS: 3315 Chasm Lane

CITY, STATE ZIP: Manitowoc, WI 54220

EMAIL: [scholarshipchair@ouclubofwisconsin.org](mailto:scholarshipchair@ouclubofwisconsin.org)

**Information must be received by May 31, 2011**