



Scholarship Application

Name of Scholarship _____

To apply for this scholarship and/or others, please submit the completed application to the:

Office of Advancement, Kennesaw State University, 1000 Chastain Road, Mail Box # 9102, Kennesaw, GA 30144-5591

and we will forward to the appropriate selection committee.

Miss Mrs. Ms. Mr.

First Name	
Middle Name:	
Last Name	
Home Address	
City, State, Zip Code	
Home Phone Number	
Cell Phone Number	
Email Address	
Citizenship	
Georgia Resident	

➤ **IF you are currently attending KSU:**

Major	Current GPA:
Class Standing:(check one) Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate <input type="checkbox"/>	
Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>	Expected Graduation Date (Month and Year):
KSU#	

➤ **IF you are currently attending high school::**

Expected Graduation Date(Month and Year)	Cumulative High School GPA:
High School Attended	
Are you attending Full-Time	Yes <input type="checkbox"/> No <input type="checkbox"/>

Do you receive the Hope Scholarship _____yes _____no

Do you currently receive financial aid other than the Hope Scholarship? _____yes _____no

Total Financial Aid Provided: Loans: \$_____Grants/Scholarships Awards:\$_____

Other \$_____

List all extracurricular activities you have been involved in while attending KSU (or if an entering freshman, your high school).

List all community activities and programs you have been involved in. (*How many hours a month do you volunteer your time to these programs*)

Essay:

You must submit a 250-word essay in support of your scholarship application and attach to this application. The essay should address how the scholarship will contribute to achieving you educational and career goals.