**2021-2022 Undergraduate Scholarship Application**

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| Applicant Information: | | | | |
| First name: | | Last name: | | |
| WWU ID: | Email: | | Phone: | |
| Permanent Address: (Street, City, State and Zip) | | | | |
| Current Local Address: (Street, City, State and Zip) | | | | |
| WA Resident: Yes No | | US Citizen: Yes No | | |
| Scholarship(s): *please check all that apply* | | | | |
| * CSD Tuition Waiver | * Baharav | | * Carlile | |
| Scholarship qualifications: | | | | |
| * Student must be incoming or current CSD undergraduate student with junior level status by fall quarter. * Student must be enrolled full-time for the quarters receiving scholarship. * Student must meet qualifications for scholarship for which applied. | | | | |
| Application Requirements: | | | | |
| Essay:   * Write a brief description of academic and career goals (one page limit).   + Identify an accomplishment or attribute that sets you apart. * Include a brief a description of your financial need (one page limit).   Additional Information: Provide a list of activities and honors including volunteer activities and employment information. Can be in résumé format. | | | | |
| Release of Information: | | | | |
| I authorize the release of my grade transcript and the extent of my financial need (if applicable) to the scholarship committee. | | | | |
| Student Signature: | | | | Date: |
| Application deadline: May 15, 2019 | | | | |
| Submit application form and supplemental information to: [csd@wwu.edu](mailto:csd@wwu.edu)  OR ATTN: Scholarship Committee  WWU Communication Sciences and Disorders  516 High Street, AI 394 MS 9171  Bellingham, WA 98225 | | | | |