



Graduate Application for English Department Endowed Scholarships

You must be a declared American Studies, Literature and Writing, Technical Writing or Theory and Practice of Professional Communication Major to be eligible for these scholarships.

Please deliver to the English Department Main Office, Ray B. West, Suite 201

Applications will be accepted from January 1 through February 17

Personal Information

Last Name: _____ First Name: _____

Student A#: _____ Email: _____ Phone: _____

Current Address:

Street/Box#: _____ City: _____ State: _____ Zip: _____

Permanent Address (if different from above):

Street/Box# _____ City _____ State _____ Zip _____

Your Application Must Include:

- Attached Cover Letter:
 - o Needs to identify which program you are in, briefly describe plans for the remainder of your program, and outline your plans
- Attached CV (See Grad Student webpage for advice on writing a CV)
- Attached Current Transcripts

Department Program in which you are enrolled: _____

Matriculation into Program: _____

Completed number of hours: _____

Name of faculty member who can serve as a reference: _____

Additional Academic Information:

(Check All That Apply)

- Filed Program of Study in Grad Office
- Set up and Filed Paperwork for a Supervising Committee
- Defended Thesis Proposal
- Plan to Do a Plan B or C
- Plan to Receive MA
- Plan to Receive MS
- Have a Position as a Grad Instructor
- Recipient of USU Fellowship: _____ Identify: _____
- Will Be Enrolled for Minimum of 6 hours in Fall and Spring Semester

Background Information to Assess Need

Number in family _____ Number in family attending college _____ Annual family income _____

Are you a resident of Utah? Yes _____ No _____ If no, when will you be? _____ Expected Graduation date _____

Are you currently receiving any scholarships? Yes _____ No _____

If Yes, what scholarship? _____ When will this end? _____

Have you been awarded any other scholarships for next year? Yes _____ No _____

If yes, what is the name of the scholarship? _____ When will this end? _____

Are you a dependent o a USU faculty or Staff member who is eligible for half-tuition? Yes _____ No _____

If Yes: Name _____ Faculty A# _____

Statement of Financial Need: (optional)

CERTIFICATION: I certify that, as of this date, the information provided on this application is correct to the best of my knowledge, and I authorize the release of this information and/or my transcripts to any individual or institution involved in the awarding of the concerned scholarships.

Student's Signature _____

Date _____

PLEASE ATTACH A COPY OF YOUR MOST RECENT GRADE TRANSCRIPT (INCLUDING FALL SEMESTER)

FOR COLLEGE USE ONLY

Academic Record			Date Entered: _____ For: Fall Spring		
	University	Major Only			
Credit Hours			Scholarship 1:		Amount 1: _____
GPA			Scholarship 2:		Amount 2: _____