**SLIPPERY ROCK UNIVERSITY ALUMNI ASSOCIATION SCHOLARSHIP**

**Return to: Office of Alumni Engagement**

 **Russell Wright Alumni House & Conference Center**

 **Slippery Rock University**

 **Slippery Rock, PA 16057**

 **Email Submissions: alumni@sru.edu**

NAME

PERMANENT ADDRESS

CAMPUS ADDRESS

TELEPHONE       SRU Email:       A00 Student I.D.:

NAME OF ALUMNI ASSN. MEMBER RELATED TO

APPLICANT’S UNDERGRADUATE DEGREE INFORMATION:

MAJOR       QPA

MINOR       QPA

OVERALL QPA       OVERALL GPA

CREDITS COMPLETED       TRANSFERRED       REMAINING       IN PROGRESS

EXTRA CURRICULAR ACTIVITIES AND SERVICE DURING UNIVERSITY STUDIES – UNIVERSITY AND COMMUNITY. (INCLUDE LOCATION OF SERVICE AND BEGINNING AND ENDING DATE, INSTRUCTOR/CONTACT NAME)

HONORS AND AWARDS DURING UNIVERSITY STUDIES (INCLUDE CRITERIA/DESCRIPTION OF AWARD AND DATE RECEIVED.)

Name of persons writing your Letters of Recommendation:       ,

WILL YOU BE A FULL-TIME STUDENT, IN A BACHELOR’S DEGREE PROGRAM, DURING THE 2020-2021 ACADEMIC YEAR?      **YES** **NO**

ANTICIPATED GRADUATION DATE - MONTH       YEAR

PERSONAL RELEASE: I grant permission to Slippery Rock University to release my personal academic and financial aid records to the SRU Alumni Association for review by its Scholarship and Awards Committee and permit publication of personal academic information contained within.

APPLICANT’S SIGNATURE DATE

IT IS THE APPLICANT’S RESPONSIBILITY FOR THE RETURN OF THIS FORM AND ALL RELEVANT MATERIALS BY **MONDAY, DECEMBER 9, 2019**. ***NO LATE OR PARTIAL APPLICATIONS WILL BE CONSIDERED.***

**SCHOLARSHIP RECIPIENTS WILL BE CONTACTED AFTER FEBRUARY 3, 2020.**