



**SIUE Alumni Association Legacy Scholarship**  
**College Student Application for 2008-2009**  
DEADLINE: Postmark March 1, 2008

**ALL INFORMATION WILL BE KEPT *STRICTLY CONFIDENTIAL*.**

**Personal Information**

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Social Security Number \_\_\_\_\_ Email Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Prospective Major \_\_\_\_\_ Career Goal(s) \_\_\_\_\_

Name/Location of College Currently Attending \_\_\_\_\_

GPA \_\_\_\_\_ On A Scale Of \_\_\_\_\_ Year in School: Fresh Soph Jr Sr \_\_\_\_\_

Date of Birth \_\_\_\_\_

**Family Information**

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Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Or Legal Guardian's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Number and Age of Siblings 1 \_\_\_\_ 2 \_\_\_\_ 3 \_\_\_\_ 4 \_\_\_\_ 5 \_\_\_\_ 6 \_\_\_\_

**EXTRACURRICULAR ACTIVITIES AND EMPLOYMENT:** The purpose of this section is to determine the use of your non-classroom time *while attending college*. Please list any other factors that bear on the use of that time including (but not limited to) employment, family obligations, rehearsals and any special projects (i.e. research activities or creative endeavors.) **You must** indicate the amount of time spent weekly on each activity.

**Extracurricular Activities – Please add additional pages as needed.**

Activity	Description (Note any leadership positions)	Hours Per Week	Weeks Per Year

**Volunteer Work and Community Service (unpaid) – Please add additional pages as needed.**

Activity	Description (Note any leadership positions)	Hours Per Week	Weeks Per Year

**Honors and Awards – Please add additional pages as needed.**

Honor/Award Name	Description (include nature and level of competition)	Honor or Award Type		Date Received Mo/Yr
		Academic	Other	

First and Last Name: \_\_\_\_\_

**Employment (paid) – Please add additional pages as needed.**

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Organization/Position	Responsibilities	Hours Per Week	Dates Involved	

To what have you or will you put your earnings?

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**Essay Instructions:**

You will be assessed on your ability to answer the following essay questions. Please be thoughtful and answer the questions directly. Please attach your responses to the two essay questions. Each answer should not exceed 500 words.

1. Reflecting on your personal experiences and/or circumstances, tell us something about yourself not already or sufficiently communicated in your application that distinguishes you as a potential scholarship candidate.
2. Please tell us your financial need for this scholarship.

**Applicant Certification**

Your signature is required below. Without your signature, your application is not complete.

I certify that the information provided in this application is true, complete and accurate and that all statements and essays are my own work. The Alumni Legacy Scholarship may be denied or revoked if any information is found to be incomplete or inaccurate. I give permission to the SIUE Alumni Association to contact the SIUE Student Financial Aid and Students Records office to obtain information from my Free Application for Federal Student Aid and other records including GPA. Should I receive an award, I give permission to the SIUE Alumni Association to utilize my name and award amount in any publicity or marketing materials.

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Signature of Application (in ink)

Date

First and Last Name: \_\_\_\_\_

## Alumni Certification

As a member of the SIUE Alumni Association, I certify the information in this application is accurate and current and that I am a member in good standing of the SIUE Alumni Association.

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Member's Name

Relationship to Application

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Member's Social Security Number

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Member's Signature

First and Last Name: \_\_\_\_\_