Scripps Howard Foundation Scholarship

APPLICATION

Name _________________________________________________________________

Address ________________________________________________________________

City ______________________________ State ________________ Zip ____________

Phone ____________________________ Social Security # _____________________

_ Male  _ Female  Age _________ Date of Birth _____________________________

College Attending ________________________________________________________

School Address __________________________________________________________

________________________________________

Level:   _ Sophomore
        _ Junior

FAMILY INFORMATION (optional)

Name of Parents or Guardians ______________________________________________

Address ________________________________________________________________

City ____________________________ State _____________ Zip ________________

Phone __________________________

HIGH SCHOOL INFORMATION

Name of High School Attended _____________________________________________
Address ________________________________________________________________
City ___________________________________ State _______ Zip ________________
Graduation Date _________________________

COLLEGE INFORMATION

List any college scholarships or grants received:

Grants/Scholarships                  Amount                  Duration
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

CAREER GOALS

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

WORK EXPERIENCE

Include company names, duties and dates of employment (include résumé if necessary)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
ACTIVITIES, ACHIEVEMENTS & COMMUNITY INVOLVEMENT

List any hobbies or extra curricular activities that you enjoy __________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List any honors, awards of recognition you have received __________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List community involvement and / or community service projects you’ve been involved in______________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

PERSONAL STATEMENT

Write a personal statement (not to exceed 500 words) to support your application. Please explain what sets you apart from the other candidates. Personal statement must be typed and submitted with your complete application.

ACKNOWLEDGEMENTS

Is application for Federal Student Aid on file at the Student Financial Aid Office?
_ Yes  _ No
I certify that all the above statements are true. I will appear for a personal interview with the selection committee if chosen as one of the finalists. I also agree to abide by the final decision of the selection committee.

Signature ______________________________________________

Date __________________________________________________

APPLICATION CHECKLIST

_ Application completed and signed
_ College Transcripts
_ Letters of Recommendation (2)
_ Personal Statement

Submit application to:
Florida Atlantic University
School of Communication & Multimedia Studies (GCS 259)
777 Glades Road
Boca Raton, FL 33431

THE DOROTHY F. SCHMIDT COLLEGE OF ARTS AND LETTERS
School of Communication & Multimedia Studies
777 Glades Road, GCS 259, Boca Raton, FL 33431
tel: 561.297.3850 • fax: 561.297.2615 • www.fau.edu/scms • www.fau.edu

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