



**SCHOLARSHIP APPLICATION
THE UNIVERSITY OF OKLAHOMA
BIOLOGICAL STATION
SUMMER SESSION COURSES**

<u>DEADLINE</u>
MAY SESSION: _____
AUGUST SESSION: _____



PLEASE TYPE OR PRINT LEGIBLY

SESSION(S) FOR WHICH YOU ARE APPLYING:			SESSION I (MAY) <input type="checkbox"/>	SESSION II(AUGUST) <input type="checkbox"/>
1. NAME:	<i>Last</i>	<i>First</i>	<i>MI</i>	<i>Preferred</i>
2. SOONER ID:		3. *SSN Number:		
4. E-MAIL ADDRESS(ES):		5. Cell Phone: ()		
6. PERMANENT ADDRESS:				
CITY:		STATE:		ZIP:
7. NON-RESIDENT <input type="checkbox"/>	8. PAY NON-RESIDENT TUITION: YES <input type="checkbox"/>		9. GRADUATE <input type="checkbox"/>	
10. COLLEGE OR UNIVERSITY CURRENTLY ATTENDING:				
11. PRESENT OR PROPOSED MAJOR FIELD OF STUDY:				
12. GPA (overall):	13. GPA (in science courses):(See brochure for instructions on how to calculate)			
14. *LIST ALL PREVIOUS COLLEGES AND UNIVERSITIES ATTENDED:				
NAME	LOCATION	DATES ATTENDED	DEGREE RECEIVED/ HOURS COMPLETED	
15. *LIST ALL ACADEMIC ASSISTANCE YOU HAVE RECEIVED: (Attach additional sheet if necessary)				
TYPE OF AWARD	INSTITUTION		DATE	AMOUNT
16. PRESENTLY EMPLOYED? YES <input type="checkbox"/>		17. NET MONTHLY EARNINGS: \$		
18. NO. DEPENDENTS:	19. EMPLOYER'S NAME:			
20. EMPLOYER'S ADDRESS:				
21. OTHER HOUSEHOLD INCOME FROM EMPLOYMENT?: YES <input type="checkbox"/>			22. NET MONTHLY EARNINGS: \$	
23. EMPLOYER'S NAME:				
24. EMPLOYER'S ADDRESS:				

*REQUIRED INFORMATION – APPLICATION WILL NOT BE CONSIDERED UNLESS COMPLETED

NAME:		SOONER ID:	
25. JOBS HELD SINCE HIGH SCHOOL (Attach additional sheet if necessary)			
EMPLOYER	TYPE OF JOB	DATES	REASON FOR LEAVING
26. ACADEMIC ORGANIZATIONS AND HONORS:			
27. *NAMES OF TWO PROFESSIONAL REFERENCES: (May include past or present instructors)			
NAME	PHONE <i>(Including Area Code)</i>	E-MAIL	
	()		
	()		
28. DESCRIBE HOW THIS SCHOLARSHIP AND YOUR PARTICIPATION AT THE BIOLOGICAL STATION WILL AID IN OBTAINING YOUR GOALS:			
29. TITLE(S) OF COURSE(S) YOU WISH TO APPLY FOR SCHOLARSHIP (SCHOLARSHIPS AVAILABLE FOR ALL CLASSES):			
30. WILL YOU BE ABLE TO ATTEND WITHOUT A SCHOLARSHIP/FINANCIAL AID? IF NOT, PLEASE EXPLAIN (Attach additional sheet if necessary):			NO <input type="checkbox"/>

X

SIGNATURE (Original Signature Required)

DATE

***REQUIRED INFORMATION – APPLICATION WILL NOT BE CONSIDERED UNLESS COMPLETED.**

Scholarships are primarily merit-based, but financial need will also be taken into consideration. Students are also encouraged to apply for financial aid through their home-institution financial aid office.