

SCHOLARSHIP AWARD APPLICATION-2021



GRAMBLING UNIVERSITY NATIONAL ALUMNI ASSOCIATION

DOUGLAS L. WILLIAMS CHAPTER

Application package due: May 1, 2021

**IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT
GSUHOUSTONALUMNISCHOLARSHIP@GMAIL.COM, 281-780-2178.**

WHO IS ELIGIBLE TO APPLY?

- A graduating high school senior admitted or expected to be admitted by the award date to Grambling State University
- A resident of Houston or surrounding areas within a 100-mile radius
- A student with an overall GPA of 2.5 or above (on a 4.0 scale)

HOW TO APPLY?

- Mail the completed application to
Douglas L. Williams Alumni Chapter-GUNAA
P.O. Box 845 Missouri City, TX 77459-0845
If you are mailing your application, please include all items in one packet.
- Complete the form online at www.gsuhoustonalumni.com

FINAL PACKAGE CHECKLIST

Please note, incomplete application packets will not be considered.

- [] Completed application
- [] Uploaded or mailed official transcript.
- [] Uploaded or mailed high resolution headshot (300 psi or above, if uploading)
- [] Uploaded or mailed topic essay (500 words)
- [] Uploaded or mailed official SAT or ACT scores
- [] Two signed letters of recommendations
 - If mailing, please have the person writing the recommendation place it in a sealed envelope. Include both letters, in sealed envelopes, in your overall packet.
 - If uploading, please have the person writing the recommendation scan a signed version to gsuhoustonalumnischolarship@gmail.com. Your packet will be considered complete once we receive the completed online application, and two emails containing recommendations.

SECTION I – PERSONAL INFORMATION

1. NAME _____
LAST FIRST MIDDLE

2. CURRENT ADDRESS: _____
STREET

CITY STATE ZIP

3. DATE OF BIRTH: _____ GRAMBLING ID# _____

4. STUDENT'S EMAIL: _____

5. STUDENT'S NUMBER: _____

6. GUARDIAN'S EMAIL: _____

7. GUARDIAN'S NUMBER: _____

8. DO YOU HAVE A FAMILY MEMBER WHO ATTENDED GRAMBLING STATE
UNIVERSITY? [] YES [] NO

IF SO, WHO AND YEARS ATTENDED _____

9. HAVE YOU ATTENDED ANY EVENTS HOSTED BY THE DOUGLAS L. WILLIAMS
ALUMNI CHAPTER? [] YES [] NO

IF SO, WHAT EVENTS DID YOU ATTEND _____

10. AWARDS, HONORS & EXTRACURRICULAR ACTIVITIES

FRESHMAN YEAR	SOPHOMORE YEAR
JUNIOR YEAR	SENIOR YEAR

11. ANYTHING ELSE YOU WANT TO SHARE OR WOULD LIKE THE COMMITTEE
TO CONSIDER? (100 words or less)

SECTION II – REFERENCES

PROVIDE THE INFORMATION BELOW FOR THE PEOPLE WHO WILL BE
SUBMITTING YOUR REFERENCE LETTERS.

NAME	EMAIL	PHONE

SECTION III- COMMUNITY SERVICE

LIST AGENCY, CONTACT NAME, PHONE NUMBER OR EMAIL AND A BRIEF DESCRIPTION OF YOUR CONTRIBUTION. PLEASE INCLUDE DATES OF SERVICE AND HOW OFTEN YOU VOLUNTEERED.

[illegible]

SECTION IV – ESSAY

PLEASE PREPARE A CONCISELY WRITTEN COMPOSITION (500 WORDS) ADDRESSING ONE OF THE TOPICS BELOW. PLEASE INCLUDE THE ESSAY AS AN ADDITIONAL DOCUMENT IN YOUR SCHOLARSHIP PACKET.

QUESTION 1 – TELL US WHY YOU HAVE CHOSEN TO ATTEND GRAMBLING STATE UNIVERSITY.

OR

QUESTION 2 – HOW DO YOU BELIEVE GRAMBLING STATE UNIVERSITY WILL PREPARE YOU FOR YOUR CHOSEN CAREER FIELD?

SECTION V-ADDITIONAL DOCUMENTS

IN ADDITION TO THIS COMPLETED APPLICATION, PLEASE INCLUDE THE FOLLOWING IN YOUR PACKET:

- OFFICIAL TRANSCRIPT
- HIGH RESOLUTION HEADSHOT (300 PSI OR ABOVE, IF UPLOADING)
- OFFICIAL SAT OR ACT SCORES
- TWO SIGNED LETTERS OF RECOMMENDATIONS. PLEASE SEE THE INSTRUCTIONS PAGE (PAGE 1) FOR MORE INFORMATION.

SECTION VI – APPLICANT’S STATEMENT

BY SUBMITTING THIS APPLICATION, I HEREBY CERTIFY THAT ALL INFORMATION I HAVE PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE TO THE FOLLOWING:

1. I AM A HOUSTON AREA STUDENT OR RESIDE WITHIN A 100-MILE RADIUS WHO WILL BE ENROLLED AT GRAMBLING STATE UNIVERSITY IN THE FALL OF 2020.
2. I WILL USE THE PROCEEDS OF ANY SCHOLARSHIPS RECEIVED FOR THE PAYMENT OF BOOKS AND SUPPLIES AND/OR TUITION.
3. I WILL CONTACT THE DLW SCHOLARSHIP COMMITTEE IF CHANGES OCCUR TO ANY INFORMATION SUBMITTED IN THIS APPLICATION.
4. IF AWARDED THE SCHOLARSHIP, I UNDERSTAND THAT IF I, OR A DESIGNATED REPRESENTATIVE, MUST ATTEND A RECEPTION CEREMONY. FAILURE TO ATTEND THE CEREMONY WILL RESULT IN FORFEITURE OF THE SCHOLARSHIP AWARD.
5. I UNDERSTAND THAT SUBMISSION OF THIS APPLICATION CONTRIBUTES PERMISSION TO USE MY NAME AND PHOTOGRAPH FOR PROMOTIONAL PURPOSES.
6. IN THE EVENT I RECEIVE A SCHOLARSHIP, I AGREE TO VOLUNTEER A MINIMUM OF 20 HOURS OF SERVICE TO THE ALUMNI ASSOCIATION DURING THE FALL/SPRING SEMESTERS OF THE SCHOOL YEAR.
7. ANY ITEM NOT SUBMITTED BY THE DEADLINE OR IS INCOMPLETE, WILL VOID MY APPLICATION.
8. I UNDERSTAND COMMUNICATIONS ARE PRIMARILY SEND VIA EMAIL. I WILL CHECK THE EMAIL ADDRESS LISTED OFTEN AND RESPOND TO CORRESPONDENCES ACCORDINGLY.

NAME

DATE