**Check one**:

Application of:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student ID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] DGRobinson

[ ] Freshman [ ] Sophomore [ ] Junior

[ ] Senior

**Grambling University**

**National Alumni Association - Metropolitan DFW Chapter**

**Scholarship Application Packet**

GUNAA – Metropolitan DFW Chapter

P.O. Box 182303

Arlington, TX 76096

[gsumetrodfwscholarship@gmail.com](mailto:gsumetrodfwscholarship@gmail.com)

Grambling University

National Alumni – Metropolitan DFW Chapter

Scholarship Requirements Overview

**Application Period**

**Deadline:** July 30th (Current Year)

**Scholarship Award Information**

**Amount**: $3,000.00 (Doris Robinson Scholarship); $500 (Regular/Book Grants)

*Incoming Freshmen may apply for both the Doris Robinson Memorial and Regular Scholarship*

**Upon enrollment verification, awards will be electronically transferred to the university prior to semester registration deadline and earmarked for the awardee.**

**Eligibility Requirements:**

* Applicant must be a graduate from a Metropolitan DFW area high school.
* Applicant must have an overall cumulative GPA of 2.5 or greater on a 4.0 scale.
* First time freshman fall applicants must meet all State of Louisiana admission criteria as cited on the GSU Admissions website: <http://wwwgram.edu/admissions/apply/>

**Application Requirements and Checklist**

* Completed Application Form.
* Official high school transcript (Doris Robinson Memorial Scholarship only)
* 500 word minimum, double spaced, 12-point font essay OR create a 1-2 minute video and include website address in application
* Two letters of recommendation.
* All materials must be submitted in one packet. (incomplete applications will not be considered)

**Applications must be mailed or emailed to:**

GUNAA – Metropolitan DFW Chapter

Attn: Scholarship Committee

P.O. Box 182303

Arlington, TX 76096

Email: gsumetrodfwscholarship@gmail.com

|  |  |
| --- | --- |
| [Image result for grambling state university logo](https://www.google.com/url?sa=i&source=images&cd=&cad=rja&uact=8&ved=2ahUKEwi7x6brk4nbAhWJVN8KHVkYA08QjRx6BAgBEAU&url=http://www.gram.edu/news/logo.php&psig=AOvVaw0_Ful2JXWNvK2gZ0ynf5Nw&ust=1526523088231143) | GUNAA Metropolitan DFW Chapter |

# Scholarship Application

[ ] Doris Robinson Memorial (Incoming Freshman Only)

[ ] Incoming Freshman Regular

[ ] Returning Student

[ ] Book Grant

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full Name:** |  |  |  | **Date:** |  |
|  | **Last** | **First** | **M.I.** |  |  |

|  |  |  |
| --- | --- | --- |
| **Address:** |  |  |
|  | **Street Address** | **Apartment/Unit #** |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | **City** | **State** | **ZIP Code** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Phone:** |  | **Email** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of Birth:** |  | **Student ID Number.:** |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Have you been accepted into Grambling State University?** | **YES** | **NO** | **If yes, when?** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Are you the first person in your family to go to college?** | **YES** | **NO** |  |

## Family Information

|  |  |  |  |
| --- | --- | --- | --- |
| **Father’s Name:** |  | **Occupation:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Mother’s Name:** |  | **Occupation:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Guardian’s Name:** |  | **Occupation:** |  |

|  |  |
| --- | --- |
| **Are the parents or guardians a graduate from Grambling Sate University?** |  |
| |  |  | | --- | --- | | **YES** | **NO** | |  |
|  |  |

## Education

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School Name:** | |  | **Graduation Date:** |  |
| **Grade Point Average:** | |  | **Phone:** |  |
| **Address:** | |  | | |
|  | |  | | |
|  | |  | | |
|  | |  |  |  |
| **Extracurricular Activities and Leadership Positions held:** | |  |
|  | |  | | |
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|  | |  | | |
|  | |  | | |
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|  | |  | | | |
| **Awards and/or Special Honors Received:** | |  | | | |
|  | |  | | | |
|  | |  | | | |
|  | |  | | | |
| **Community Service Activities and/or Projects** | |  | | | |
|  | |  | | | |
|  |  | | | | |

## Disclaimer and Signature

**I certify that my answers are true and complete to the best of my knowledge.**

**If this application leads to receiving this scholarship, I understand that false or misleading information in my application may result in denial of scholarship**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |

## Essay Information

Please submit an essay OR create a YouTube video on the following topic:

“***Describe your most meaningful achievements and how they relate to your field of study and your future goals***.”

Essay Criteria:

* The essay must be an original work.
* The essay must be typed and double spaced.
* The essay must be a minimum of 500 words.

Video Criteria:

* Video time limit is 1 minute minimum and 2 minutes maximum.
* Website address must be included in application packet.
* State your name before starting discussion of topic.

## Letters of Recommendation

Criteria:

* Recommender’s letter must include address, contact information and relationship to applicant.
* Letter must include recommender’s signature.