

THE UNIVERSITY OF MEMPHIS ASSOCIATION OF RETIREES SCHOLARSHIP APPLICATION FOR 2009-10

Description of Scholarship: The University of Memphis Association of Retirees (UMAR) awards a scholarship to a currently enrolled undergraduate at the university. The scholarship is a one-time award in the amount of \$1000 for the academic year and is not renewable for the following year. The requirements for the scholarship are current full-time enrollment (at least 12 credit hours) at The University of Memphis; completion of at least two (2) full years of study with a minimum cumulative GPA of 3.25; demonstrated leadership in university activities; and recommendation (by letter), preferably from a current or former university faculty or staff member. Priority will be given to dependents (children or grandchildren) of UMAR members or dependents of currently employed University of Memphis Faculty and Staff.

Instructions:

1. Please complete each item in ink or type. Use N/A for sections that do not apply to you.
2. This application must be received by **October 1, 2009.**
3. Please attach required faculty / staff recommendation letter to the application.

Required Information

Full Name: _____ Student I.D. # _____ - _____

Address: _____

City, State, Zip: _____

Student Level (e.g. Junior/Senior): _____ Colleges Attended /Dates (if a transfer): _____

E-Mail Address (notified by email if not selected): _____

Name of Parent/Grandparent who is either a current University of Memphis Faculty/Staff employee or who is a member of The University of Memphis Association of Retirees:

Name: _____ Relationship: _____

University Activities/Participation and Leadership (attach additional page if needed): _____

Employment (if currently or recently employed): _____

CERTIFICATION: I certify that all of the information provided on this application is true and that I have not willingly withheld any pertinent information. I will use scholarship funds for educational purposes only. I give permission for information to be given to donors and appropriate committees so that they may recommend eligible recipients. I give permission for information to be released to Media Relations and to donors for publication purposes.

Signature _____ Date _____