WEBER STATE UNIVERSITY
CHILD & FAMILY STUDIES DEPARTMENT
SCHOLARSHIP APPLICATION
GENEVIEVE WISE DEAN’S EXCELLENCE SCHOLARSHIP

SCHOLARSHIP QUALIFICATIONS

1. Must be a declared major in Early Childhood, Early Childhood Education, or Family Studies.

2. May be a part- or full-time

3. Must have a college cumulative GPA of 3.0 or above.

4. Attain Junior year standing prior to making application.

APPLICATIONS ARE DUE MARCH 21, 2016
By 4:00PM
PLEASE RETURN TO ROOM 204 or 248

Application must be complete, references letters received, to be considered
WEBER STATE UNIVERSITY
GENEVIEVE WISE DEAN’S EXCELLENCE SCHOLARSHIP
SCHOLARSHIP APPLICATION FORM

PLEASE PRINT OR TYPE APPLICATION

Name: ____________________________________________
                                            Last    First    Initial    W#

Address: ____________________________________________

City: _____________________________ State:___________ Zip: _______

Telephone: ____________________________
                                      (Area Code) (Number)

Declared Major Within Department of CHF:__________________________
                                      (Must be officially declared with Registrar)

High School of Graduation? _____________________________

College Cumulative GPA: ________________

Two (2) required reference letters requested outside the CHF department; professional references preferred.
Copy of transcript (unofficial or official) attached
Essay response below

Please explain why you feel you should be awarded this scholarship.
Please use a separate sheet of paper and answer in 12-point font with 1
each margins in no more than 2 pages.
Dear Faculty Member OR Professional,

Please send your confidential evaluation, on this form or your own, of the undersigned CHF Department Scholarship applicant addressing his/her accomplishments and potential for making a significant professional contribution. Send to Darcy Gregg, 1351 Edvalson St Dept 1301, Ogden UT 84408-1301 or email to dgregg@weber.edu. Must be received by March 21, 2016.

Name: _________________________________________________________________

ID#: _____________________________

Date: _____________________________

Signed: _______________________________________________________________

Title: __________________________________________________________________

Date: _____________________________

WEBER STATE UNIVERSITY
CHILD AND FAMILY STUDIES
SCHOLARSHIP APPLICATION REFERENCE

Letters of Reference MUST be outside the department of Child and Family Studies
WEBER STATE UNIVERSITY
CHILD AND FAMILY STUDIES
SCHOLARSHIP APPLICATION REFERENCE

Letters of Reference MUST be outside the department of Child and Family Studies

Dear Faculty Member OR Professional,

Please send your confidential evaluation, on this form or your own, of the undersigned CHF Department Scholarship applicant addressing his/her accomplishments and potential for making a significant professional contribution. Send to Darcy Gregg, 1351 Edvalson St. Dept 1301, Ogden UT 84408-1301 or email to dgregg@weber.edu. Must be received by March 21, 2016.

Name: ____________________________________________________________

ID#: _____________________________

Date: _____________________________

Signed: ____________________________________________________________

Title: ______________________________________________________________

Date: _____________________________