SCHOLARSHIP QUALIFICATIONS

1. Preference given to a graduate of a private or public high school in Weber County.

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

3. Must be a full-time student (12 credits hours or more).

4. Must have a college cumulative GPA of 2.5 or above.

5. Demonstrate financial need.

APPLICATIONS ARE DUE MARCH 22, 2017
By 4:00PM
PLEASE RETURN TO ROOM 204 or 248

Application must be complete, references letters received, to be considered
WEBER STATE UNIVERSITY
RUSSELL FAMILY 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 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.
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 22, 2017.

Name: __________________________________________________________

ID#: ________________________________

Date: ________________________________

Signed: _______________________________________________________

Title: __________________________________________________________

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

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Name: ____________________________________________________________

ID#: _____________________________________________________________

Date: __________________________________________________________________

Signed: __________________________________________________________________

Title: __________________________________________________________________

Date: __________________________________________________________________