

# **Dr. Hugh Puckett – AED Scholarship Form 2016-2017**

Name \_\_\_\_\_ WKU ID # \_\_\_\_\_

\_\_\_\_\_  
Permanent Street Address                      City                      State                      Zip

\_\_\_\_\_  
Campus Street Address                      City                      State                      Zip

Permanent Phone # \_\_\_\_\_ School Phone # \_\_\_\_\_

Academic Major(s) \_\_\_\_\_ Minor(s) \_\_\_\_\_

Science GPA \_\_\_\_\_ Overall GPA \_\_\_\_\_

List below any scholastic honors, awards, and recognitions you have received (i.e., scholarships, Dean's List, Honor Societies, etc.)

List below any extracurricular activities (student offices held, society membership and activities, athletic activities, etc.)

Write a brief summary of your personal and professional goals. Include any experiences or activities that relate to those goals.

Signature \_\_\_\_\_

Date \_\_\_\_\_