

**Department of Family and Consumer Sciences
Scholarship Application**

Submit this form to the AHS Department office by April 1.

Students must also complete an application in TopDollar to receive award.

Full Name: _____ **WKU ID#** _____

Home Address: _____

WKU/Local Address: _____

Home Phone #: _____ **Cell Phone #** _____

E-mail address: _____

WKU Major: _____ **WKU Minor:** _____

Cumulative WKU GPA: _____ **Student Status:** Full time Part time

Number of hours earned at the end of current year: _____

Classification: Freshman Sophomore Junior Senior

Current Employer:

List Department, WKU, and Community Organizations in which you participate:

Name of Organization	# of Years	Office(s) held

Office Use Only: Date form received from student: _____ Date information sent to Foundation: _____ Award Amount: \$ _____
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