

Drake Alumnae Association of Des Moines Scholarship Fund

Application for Scholarship – Deadline for application is Monday, March 29, 2010

Name _____ Date _____

Campus address _____ City _____

State _____ Zip _____ Campus phone _____

E-mail _____

Permanent address _____ City _____

State _____ Zip _____ Permanent Phone _____

College & Major _____

G.P.A. _____ Current Year in School _____ Expected date of graduation _____

must be 3.0 or higher to apply

Qualifications for Scholarship: Applicant must be a Drake student who is currently a Sophomore, Junior, P1 or P2 student, of good moral character and of good academic standing, pursuing any undergraduate courses offered by Drake University. The applicant must show need, academic achievement (GPA of 3.0 or better), and involvement in campus and community activities.

This scholarship is for the purpose of paying the recipient's tuition at Drake University and will be paid directly to Drake University. The Scholarship Board shall be the sole judge of who qualifies under the above conditions. The amount of this award is at least \$2,000. We will notify the students of their award in May. The money will be credited to their account at the financial aid office as an outside scholarship, meaning it will not diminish any scholarships they are already receiving.

Extra Curricular/Community Activities: Please attach a resume or a separate sheet listing these activities. Be sure to include all campus activities, community activities, volunteer service, and employment history.

References: Please include two letters of reference in support of your application. One must be from a professor within your major or department and one should be a personal reference. Please list the names of your references below. Note that it is **YOUR** responsibility to ensure that the letters of reference accompany this application.

Need: On a separate page, please describe how this scholarship would help ease and/or alleviate your financial needs, giving specific examples of your needs. Also please address how this scholarship will assist you in achieving your future goals. Attach this page to this application. Note that in order for us to assess your financial need we will need to review your financial aid file. By signing below you are giving permission for your financial aid information to be reviewed by the Alumnae Scholarship Committee.

Signature of Applicant

Date

Mail completed application and letters of reference together to:

Drake University Office of Alumni and Parent Programs

Attention: Jonathan Brendemuehl

Kinne Alumni and Development Center

2507 University Ave. Des Moines, IA 50311