Application for Returning Student Scholarship

Applicant: ____________________________________________________________

Work Phone Number: ____________________________________ Home or Cell Phone Number: __________________________

FSU ID No.: __________________________________________ Email: __________________________________________

Term/Year applying for: ☐ Fall ☐ Spring ☐ Summer

Application Deadlines for the Returning Student Scholarship

Fall Award - June 1, Spring Award - November 1, Summer Award - March 1

In order to be considered for the award, all completed materials must be received by 5 p.m., Eastern Time, by the above deadlines and addressed to:

Returning Student Scholarship Selection Committee
Attention: Rosemary Arline
Florida State University
Center for Academic & Professional Development
555 West Pensacola Street; Tallahassee, FL 32306-1640
Phone: (850) 644-7572; Fax: (850) 644-7571
Email: rarline@fsu.edu

About The Returning Student Scholarship

The Returning Student Scholarship program is comprised of four scholarships:

The Florida State College of Women Class of 1943 Endowed Scholarship
The Reva Daniels Metzinger Returning Student Endowed Scholarship
The Dr. Mary L. Pankowski Returning Student Endowed Scholarship
The Freida Frei Meland Endowed Scholarship

The scholarships were established to provide financial assistance to deserving adults who wish to return to school. Scholarships will be awarded based on ALL the following criteria.

Scholarship Criteria

1. Male or female, 23 years of age or older, Florida resident;
2. Have at least a five (5) year consecutive break in education. However, students who have a 5-year break and return to a community college to complete an AA degree will be eligible for consideration upon their transfer to Florida State University.
3. Admitted as a degree seeking, undergraduate or graduate student at Florida State University;
4. Demonstration of financial need;
5. Strength of applicant’s personal statement;
6. Strength of applicant’s statement of how the scholarship will impact his/her life;
7. Previous academic record;
8. Strength of recommendation letters;
9. Motivation and potential.

The Returning Student Scholarship awards $1,000 per semester for a maximum of three semesters. The scholarship will be automatically renewed provided a 2.5 GPA is maintained.*

*Applicants grant the Selection Committee permission to verify the applicant’s grades.
Application

Please clearly print or type your responses to the following information below. Attach all statements, transcripts (copies are acceptable), letters of recommendation, and any other pertinent information to the back of this application.

1. Name in full: ____________________________________________________________________________
   (Last) (First) (MI) (Maiden)

2. FSU ID No.: __________________________________________

3. Permanent Address: _________________________________________________________________________
   (Street) (City) (State) (Zip)

4. Date of Birth: ___________________________ Place of Birth: ____________________________
   Citizenship: _____________________________________________________________________________

5. Are you a Florida Resident? [lived in Florida for one year] (Circle One) Yes No

6. Marital Status (Circle One) Single Married Widowed Divorced Separated

7. If Married, Spouse’s Name: ___________________________________________________________________
   Spouse’s Occupation: __________________________________________________________________________

8. If any, names and ages of children: ___________________________________________________________________
9. Previous Academic Record

a. High School
   Name and location: ______________________________________________________________
   Dates attended: ________________________ Month/Year graduated: ______________________
   Academic honors: ______________________
   Membership in organizations/clubs: ________________________________________________

b. Technical or Business Training, if applicable
   (If more than one, please attach additional information to the back of this application.)
   Name and location: ______________________________________________________________
   Dates attended: ________________________ Did you graduate?: ________________________
   Month/Year graduated: ______________________ Certificate/degree: ______________________
   Course of study: ______________________
   Academic honors: ______________________

 c. Undergraduate College or University
    (If you have attended more than one college or university, please attach additional information to the back of this application.)
   Name and location: ______________________________________________________________
   Dates attended: ________________________ Did you graduate?: ________________________
   Month/Year graduated: ______________________ Degree earned: ______________________
   Major Field of study: ______________________
   Academic honors: ______________________
   Membership in organizations/clubs: ________________________________________________

d. Attach transcripts for all academic work listed above. Copies are acceptable.

10. Education interruption(s): (Must be at least five years)
    From: ________________________ To: ________________________
    From: ________________________ To: ________________________
11. Present Education

a. Admittance

Are you presently taking classes at Florida State University? *(Circle One)* Yes No

Are you currently admitted to FSU as a degree-seeking student? *(Circle One)* Yes No

If not, have you applied? __________________________ Date applied __________________________

If applicable, have you been admitted to your college or school? *(Circle One)* Yes No

If not, have you applied? __________________________ Date applied __________________________

b. Registration

Are you registered for next semester? *(Circle One)* Yes No

If so, how many hours? __________________________

For what degree? *(Circle One)* Bachelor Masters Doctorate Other __________________________

In what degree program? ___________________________________________________________________

Expected graduation date ___________________________________________________________________

c. Educational aspirations

Do you plan to further your education? *(Circle One)* Yes No

For what degree? *(Circle One)* Bachelor Masters Doctorate Other __________________________

12. Employment Record

Please list your most recent position first. If you need additional space, attach additional sheets.

You may attach a résumé in lieu of completing item 12.

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<th>Job title/position</th>
<th>Employer</th>
<th>Dates employed</th>
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Special recognition(s):

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Special contribution(s):

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

13. Volunteer Activities

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<th>Type of work/position</th>
<th>Organization</th>
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14. Please provide a personal statement covering your previous education, employment, personal and family experiences; your academic professional aspiration; why you want to attend the university at this time; whether you have changed your field and what caused you to change; your perception of your abilities; and any other comments relevant to your application.

15. Please furnish a separate statement that clearly expresses what this scholarship would mean to you personally/professionally if you were the successful candidate. How would the awarding of this scholarship impact your personal/professional life? This statement is an important part of the application and should be strong and convincing.

16. Please attach a statement describing your financial need. Your statement of financial need is a very important part of the scholarship application and should demonstrate strong financial need for the awarding of this scholarship.

17. Please submit three letters of recommendation. They may be attached to this application. List below the names and addresses of these individuals. Letters of recommendation should be addressed to the Returning Student Selection Committee. To add to the strength of the application, one of the letters should be written by a current or former professor or employer.

Name: ____________________________
Address: ____________________________

Name: ____________________________
Address: ____________________________

Name: ____________________________
Address: ____________________________

18. How did you learn about this scholarship?

_______________________________________________________

19. Have you received academic or career counseling from FSU?

_______________________________________________________

For more information on returning to school, contact Sheila Bagley, Academic Program Specialist, FSU Center for Academic & Professional Development, at (850) 644-7551 or by email at sbagley@fsu.edu.

Provisions

1. In order to be considered for the award, all applications must be complete and received by the deadline, and applicants must meet all eligibility requirements as described on pages 1 and 2 of this form.

2. Applications must include this completed form, transcript(s) of academic work, three letters of recommendation, statement of financial need, a personal statement, and a third separate statement describing how the scholarship would impact your personal/professional life.

3. Recipients of the award must be Florida State University students.

4. The Scholarship award is $1,000 per semester.

5. Applicants are only eligible for one award per semester and a maximum of three semester awards.

6. Recipients of the award are required to write a thank you letter to the scholarship donors. This must be done before an award can be distributed.

I verify all information provided in this application is true and correct and that I meet all eligibility requirements.

I understand and have read all provisions of the Returning Student Scholarship.

Signature ____________________________ Date ____________________________