

**The University of Houston Foundation
LINDA K. MAY SCHOLARSHIP AT THE
GRADUATE COLLEGE OF SOCIAL WORK**

Eligibility Requirements:

1. Must be female. **ATTACH A COPY OF DRIVER'S LICENSE OR BIRTH CERTIFICATE.**
2. Preference will be given to a bilingual student and the same student will receive the award for 2 years if the recipient remains in compliance with all criteria.
3. Must be seeking an MSW degree in the UH Graduate College of Social Work.
4. Students must have and maintain a minimum GPA of 3.5 to continue eligibility.
5. Submit no more than one page description of your academic, financial need and how this scholarship would be of financial assistance to you.
6. **COMPLETED AUTHORIZATION FORM MUST ACCOMPANY SCHOLARSHIP APPLICATION.**

Print Legibly

Legal Name: _____
Last First Middle
Current Address: _____
Street, Apartment, or P.O. Box City, State, Zip
E-mail address: _____ Date of Birth: _____
Cell Phone: (_____) _____ Home Phone: (_____) _____

Academic data:

Are you enrolled in the MSW Program in GCSW? _____ Yes _____ No
Are you Bilingual? _____ Yes _____ No Anticipated Graduation date _____
(Mo/Yr)
Credit hours enrolled for upcoming Fall semester: _____ Cumulative GPA at UH: _____

Organizations, Activities, Awards & Honors (list only the best. Do not attach an additional sheet)

<u>Year</u>	<u>Organization/Activity</u>	<u>Special Awards/Honors/Offices Held</u>
1) _____		
2) _____		
3) _____		

I hereby certify that all information reported on this application is true and accurate to the best of my knowledge.

(Signature)

(Date)

MAIL APPLICATION TO:
UNIVERSITY OF HOUSTON FOUNDATION
4543 Post Oak Place, Suite 250
HOUSTON, TEXAS 77027

**Applications that are emailed, faxed or
incomplete will not be accepted.**

UNIVERSITY OF HOUSTON FOUNDATION
INFORMATION AUTHORIZATION FORM

REQUIRED

The University of Houston must have your written permission to release your Grade Point Average and hours of enrollment to the University of Houston Foundation. The UH Foundation needs to verify these in order to award the scholarship funds to your student account.

I give permission to the University of Houston to release to the University of Houston Foundation my grade point average for the most recently-completed semester, as well as my overall grade point average and hours of enrollment.

PRINTED NAME

(signature)

(date)

(student ID number)

OPTIONAL

The University of Houston Foundation must have your permission to release application information to the scholarship donor.

I give permission to the University of Houston Foundation to give my name to the scholarship donor if requested.

PRINT NAME

SIGNATURE

DATE