## The University of Houston Foundation HERMAN A KRAUSE SCHOLARSHIP AT THE COLLEGE OF EDUCATION

#### **Eligibility Requirements:**

- 1. Must be a Male student. ATTACH A COPY OF DRIVER'S LICENSE.
- 2. Must be a sophomore or above.
- 3. Must be a full-time student (12 hours minimum).
- 4. Must have and maintain a minimum 2.0 GPA to continue eligibility.
- 5. Must be a student in the College of Education.
- 6. Submit no more than a one-page description of your academic and career goals and how this scholarship would be of financial assistance to you.
- 7. COMPLETED AUTHORIZATION FORM MUST ACCOMPANY SCHOLARSHIP APPLICATION.

#### Personal Data: (Print Legibly)

Legal Name:				
Last	First	Middle		
Current Address:  Street, Apartment, or P.O. Box E-mail address:		City, State, Zip		
Cell Phone: ()		)		
Student ID#	_			
Academic data:				
UH Classification for upcoming Fall semester: _	Sophomore _	Junior	Senior	
MAJOR:	Cumulative GPA	Cumulative GPA at UH or Transfer GPA:		
Credit hours enrolled for upcoming Fall semester	r: Anticipa	Anticipated Graduation date:		
Organizations, Activities, Awards & Honors:		(	Mo/Yr)	
Year Organization/Activity	Special Awards/Hor	Special Awards/Honors/Offices Held		
1)				
2)				
I hereby certify that all information reported knowledge.	on this application is t	rue and accurate to th	ne best of my	
(Signature)	(Da	ate)	<del></del>	

MAIL OR DROP OFF 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

Because of the recently-enacted Privacy Act, the **University of Houston** must have your written permission to release your Grade Point Average to the *University of Houston Foundation*. The UH Foundation must verify your G.P.A. in order to release the scholarship funds to your student account.

### Please sign the following statement:

I give permission to the University of Houston to release to the University of Houston Foundation my semester hours for the current semester and grade point average for the most recently completed semester, as well as my overall grade point average. This permission is granted for as long as I may have a scholarship awarded by the UH Foundation.

I also give the University of Houston Foundation permission to release my name and contact information to the organization/persons funding the scholarship.

PRINTED NAME	SIGNATURE	
STUDENT ID#	DATE	

Attach this signed form and all required documents to the scholarship application and return to the UH Foundation at the address shown on the application.