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. <u>COMPLETED AUTHORIZATION FORM MUST ACCOMPANY SCHOLARSHIP</u> <u>APPLICATION.</u>

Personal Data: (Print Legibly)

City, State, Zip Date of Birth:	
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I hereby certify that all information reported on this application is true and accurate to the best of my knowledge.

(Signature)

(Date)

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.

For further information, call the University of Houston Foundation, 713-622-6061

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.