

**The University of Houston Foundation**  
**THE RALSTON FAMILY WOMEN IN ENGINEERING SCHOLARSHIP**  
**AT THE CULLEN COLLEGE OF ENGINEERING**

**Eligibility Requirements:**

1. Must be a female. **ATTACH A COPY OF DRIVERS LICENSE OR BIRTH CERTIFICATE.**
2. Must have graduated from a high school located in the Greater Houston area.
3. Student must be an undergraduate sophomore for incoming fall semester (enrolled in 12 hours).
4. Must be an Engineering major, actively pursuing an undergraduate engineering degree at the Cullen College of Engineering at the University of Houston.
5. Must be a full-time student enrolled in 12 or more credit hours.
6. Must have and maintain a cumulative grade point average (GPA) of 3.0 to continue eligibility.
7. Must be in current good academic standing at the University of Houston.
8. Submit a one-page essay description of your academic and career goals and how this scholarship would be of financial assistance to you.
9. **COMPLETED AUTHORIZATION FORM MUST ACCOMPANY SCHOLARSHIP APPLICATION.**

**Personal Data:** (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: ( \_\_\_\_\_ ) \_\_\_\_\_

Student ID# \_\_\_\_\_

**Academic data:**

UH Classification for upcoming Fall semester: \_\_\_\_\_ Sophomore

MAJOR: \_\_\_\_\_

Cumulative GPA at UH: \_\_\_\_\_ Transfer GPA (if a transfer student): \_\_\_\_\_

Are you enrolled in the College of Engineering? \_\_\_\_\_ Yes \_\_\_\_\_ No

Name & Address of high school you graduated from:  
 \_\_\_\_\_

Credit hours enrolled for upcoming Fall semester: \_\_\_\_\_ Anticipated Graduation date: \_\_\_\_\_  
(Mo/Yr)

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

Year	Organization/Activity	Special Awards/Honors/Offices Held
1) _____	_____	_____
2) _____	_____	_____

**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.**