

**The University of Houston Foundation**  
**THE FEDERATION OF HOUSTON PROFESSIONAL WOMEN SCHOLARSHIP**  
**AT THE C. T. BAUER COLLEGE OF BUSINESS**

**Eligibility Requirements:**

1. Must be U.S. Citizen. **ATTACH A COPY OF BIRTH CERTIFICATE OR PASSPORT.**
2. Must be a female student.
3. Must qualify for in-state tuition.
4. Must be entering the senior year of undergraduate (12 hours minimum) study in the College of Business.
5. Must have and maintain a minimum 3.0 GPA to continue eligibility.
6. Preference will be given to the student demonstrating the strongest financial need.
7. Submit no more than one page description of your academic and career goals and how this scholarship would be of financial assistance to you.
8. **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  
Do you qualify for in-state tuition? \_\_\_\_\_ Yes \_\_\_\_\_ No Student ID# \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_

**Academic data:**

UH Classification: Will you be entering as a senior for the fall semester? \_\_\_\_\_ Yes \_\_\_\_\_ No  
MAJOR: \_\_\_\_\_ Cumulative GPA at UH or Transfer GPA: \_\_\_\_\_  
Are you enrolled in C.T. Bauer College of Business? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Number of hours completed at UH: \_\_\_\_\_ 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)

<u>Year</u>	<u>Organization/Activity</u>	<u>Special Awards/Honors/Offices Held</u>
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.**