

BARB BROWN
Randolph County Chapter of the SIU Alumni Association
1412 High St.
Chester, IL 62233
618/826-5123
bbrowncc@yahoo.com

March, 2009

Dear Applicant,

The Randolph County Chapter of the SIU Alumni Association is pleased to be offering scholarships to Randolph County students attending SIUC for the school year of 2009-2010. We are proud to have offered scholarships for twenty four consecutive years.

The funds that make the scholarship program possible are raised through contributions from Randolph County SIU alumni. We are in the process of fundraising right now and, therefore, cannot be sure of the number and amount of the scholarships that will be available. We are confident that we will have the resources to provide, at minimum, four scholarships of not less than \$250.00 each.

To be eligible for the scholarship you MUST

1. be a resident of Randolph County;
2. be enrolled at SIUC for the Fall Semester, 2009;
3. submit this completed application;
4. submit a current transcript of grades;
5. submit a copy of your Certificate of Admission to SIUC (if an incoming freshman).

All applications must be submitted by Monday, April 13, 2009. They should be sent to:

Barb Brown
1412 High St.
Chester, IL 62233

The Scholarship Committee will make its decision and notify recipients of the scholarship award by May 15, 2009. The decision of the Committee will be final.

Best of luck to you. Thank you for choosing SIUC as your institution of higher learning. We look forward to welcoming you into the ranks of our Alumni Chapter in the future.

Sincerely yours,

Barb Brown
President, Randolph County SIU Alumni

RANDOLPH COUNTY SIU ALUMNI SCHOLARSHIP APPLICATION

All information provided will be treated with strict confidentiality.

Name: _____ SSN# _____

Date of Birth: _____ Place of Birth: _____

Current Home Address: _____

Resident County: _____ Phone: _____

Schools Attended:

High Schools Attended:

Dates of Attendance:

Indicate your Class Ranking at graduation: _____ out of _____.

High School Activities and Honors: _____

Colleges or Universities Attended:

Dates of Attendance

Cumulative Grade Point Average: _____ ACT Score: _____

College Activities and Honors: _____

Major? _____

Planned Date of Graduation: _____

Career Plans after Graduation? _____

Financial Information. If self-supporting provide the following information based on your own income. **All information requested must be provided for application to be considered.**

Name of Father/Guardian/Self: _____

Annual Income from Employment: _____ Occupation: _____

Total Other Income: _____

Name of Mother/Guardian/Spouse: _____

Annual Income from Employment: _____ Occupation: _____

Total Other Income: _____

Number and Ages of Dependents in Applicant's Family (other than self): _____

Are any presently enrolled in college? _____ If so, how many? _____

Identify the source and approximate amount of additional financial assistance you expect to receive next year.

References:

List the names and contact information of three persons (not relatives) who know you well, stating their occupation.

Name	Address	Phone	Occupation
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If there are circumstances not covered in this form that you wish to be considered in processing your application, please describe them in a separate letter attached to your application.

Certification and Signature

I, the undersigned applicant, hereby certify that the statements and information contained in this application are accurate and true to the best of my knowledge. I understand that any false or incomplete information could result in my not being considered for this scholarship.

Date

Applicant's Signature