



APPLICATION FOR JOSEPH AND DOROTHY FRANCIS ENDOWED SCHOLARSHIP

Name: _____ GCSC Student ID#: _____

Address: _____

City / State / Zip _____

Email: _____ home ph: _____ work ph: _____ cell ph: _____

Major: _____ Completed credit hours to date (must be 30+): _____

Cumulative Grade Point Average: _____

Advisor:

1. Please use the space below to comment about your qualification for a scholarship, based on your <u>academic performance</u> :
2. Please use the space below to comment about your qualifications for a scholarship based on your <u>financial need</u> :
3. What are your career goals?
4. List any scholarships grants, and/or loans that you are presently receiving or will receive and the amount of each (per semester):
5. List any honors and/or award recognitions that you believe should be considered:
6. In what way would you benefit if you are selected for the scholarship?

