

# TERESAN SCHOLARSHIP GRADUATE APPLICATION

**APPLICANT:** \_\_\_\_\_  
FIRST MAIDEN LAST

**ADDRESS:** \_\_\_\_\_  
STREET CITY STATE ZIP

**HOME PHONE:** (\_\_\_\_) \_\_\_\_\_ **WORK PHONE:** (\_\_\_\_) \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **E-MAIL ADDRESS:** \_\_\_\_\_

**UNDERGRAD COLLEGE OR UNIVERSITY ATTENDED/ATTENDING:** \_\_\_\_\_

**YEAR OF GRADUATION:** \_\_\_\_\_ **MAJOR FIELD OF STUDY:** \_\_\_\_\_

**GRADUATE COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND/ARE ATTENDING:**

NAME OF INSTITUTION: \_\_\_\_\_

CITY, STATE : \_\_\_\_\_

**SPONSOR:** \_\_\_\_\_  
FIRST MAIDEN LAST

**ADDRESS:** \_\_\_\_\_  
STREET CITY STATE ZIP

**HOME PHONE:** (\_\_\_\_) \_\_\_\_\_ **WORK PHONE:** (\_\_\_\_) \_\_\_\_\_ **CST CLASS YEAR** \_\_\_\_\_

**THE FOLLOWING ITEMS ARE REQUIRED:**

- A. COMPLETED **APPLICATION FORM**
- B. COMPLETED **SPONSOR VERIFICATION FORM**
- C. AN **ESSAY** WHICH MUST INCLUDE 1) EDUCATIONAL GOALS, 2) FINANCIAL NEED, 3) COMMUNITY/VOLUNTEER SERVICE, 4) WORK HISTORY, AND 5) ACTIVITIES (*2-PAGE LIMIT*)
- D. A **LETTER OF RECOMMENDATION** FROM A TEACHER, COUNSELOR, SUPERVISOR, ETC. (MUST BE CURRENT, WRITTEN WITHIN 6 MONTHS OF APPLICATION.)
- E. **OFFICIAL TRANSCRIPT** – GRADUATE TO DATE (if applicable) *or* UNDERGRADUATE
- F. GRE OR OTHER PROFESSIONAL **EXAM SCORES** (if applicable)
- G. A NON-REFUNDABLE **CHECK FOR \$25** PAYABLE TO: *TERESAN SCHOLARSHIP FUND*

I WOULD LIKE MY APPLICATION TO BE CONSIDERED FOR THE  
**JULY 1, 20 \_\_\_\_ or NOVEMBER 1, 20 \_\_\_\_ DEADLINE**

ALL APPLICATION MATERIALS (A-G) MUST BE RECEIVED IN ONE MAILING  
 PRIOR TO OR ON THE DEADLINE DATE,  
 OR THE ENTIRE PACKET WILL BE RETURNED TO APPLICANT.