OLLU
OUR LADY OF THE LAKE UNIVERSITY

ALUMNI SCHOLARSHIP APPLICATION

Name_____
First Middle Last
Home Addtess_____
Street City State Zip
Home Telephone (_____)_____ Social Security No._____

FAMILY INFORMATION

Father_____
Name Address Telephone
Mother_____
Name Address Telephone
Alumni Sponsor_____
Name Address Telephone
Relationship of sponsor to applicant (mother, father, brother, aunt, etc.)_____

ACADEMIC BACKGROUND

High School Attended_____Graduation Date_____

College Attended_____Date Attended_____

Incoming Freshman Only:
SAT Date Taken_____Score_____ACT Date Taken_____Score_____
High School Grade Average_____ Rank in Class_____out of_____

HONORS & AWARDS

_____
_____

OFFICES & POSITIONS OF LEADERSHIP HELD

_____
_____

SCHOOL AND COMMUNITY ACTIVITIES

_____
_____

YOUR PLANS FOR OUR LADY OF THE LAKE UNIVERSITY

Accepted for: Semester/Year_____ Trimester/year_____
Major:_____

ADDITIONAL INFORMATION REQUIRED

- Two letters of reference – one from alumni sponsor and one from a non-relative – include name, address and phone number of each reference. Alumni who are applying please send both letters from non-relatives.
- One page personal letter from applicant stating why you want and financially need a scholarship
- A transcript from your high school or college last attended and ACT/SAT test scores as applicable

CERTIFICATION AND RELEASE AUTHORIZATION

I certify that the information on this application is complete and accurate. I authorize the University to release this information as necessary in connection with processing this application.

Applicant's Signature_____Date_____

Revised 8-9-06