



DEPARTMENT OF COMPUTER SCIENCE
SOUTHERN UNIVERSITY
SCHOLARSHIP APPLICATION

Name :Last: _____ First: _____ Middle: _____

Telephone: _____ E-mail Address: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Date of Birth _____ Sex: Male: Female:

Select one: Incoming Freshman Currently Enrolled Transfer

High School: Junior Senior ACT Score _____ GPA _____

College: Freshman Sophomore Junior Senior GPA _____

Names(s) of School(s) attended:

List special academic honors, special recognition, scholarships, and/or awards you have received. Clubs, organizations, extra-curricular activities and community activities and community activities in which you have participated.

Do you receive financial aid from other sources? TOPPS \$ _____

Athletic \$ _____

Other \$ _____

Expected graduation year/semester _____

Write a short essay describing how this scholarship will support your academic and career goals (250 words)

I give permission to the Department of Computer Science's Scholarship Committee to review all of my academic records.

Signature of Applicant: _____

**DEPARTMENT OF COMPUTER SCIENCE
SCHOLARSHIP REFERENCE FORM**

_____ has applied for a scholarship in Computer Science at Southern University, Baton Rouge. Please give a reference for this student, commenting on character, initiative, inventiveness, academic achievement, etc. An indication of the length of time and type of your association with this student would be helpful.

Signature _____

Title _____

Address _____

Please return this form directly to:

**Scholarship Chairperson
Department of Computer Science
Southern University
P.O. Box 9221
Baton Rouge, LA 70813**

Deadline(s): April 15 (Fall Semester); August 15 (Spring Semester)

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