



Roberta M. Wilson Scholarship

General Information			
Name :	First:	Middle:	Last:
Date of birth: / /		SSN: - -	Marital Status:
Gender:		Preferred Telephone #: ()	
Native American or Alaskan Native:		Tribe:	
Tribal Enrollment #:			
Other:			
U.S. Citizenship: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, Country of Citizenship:			
E-mail address:			
Permanent home address:			
City:		State:	ZIP Code:
If different from above, please give your current mailing address for all admission correspondence			
Current Mailing Address:			
City:		State:	ZIP Code:

Education Information

Current High School or College:

Grade:

Address of current school:

City:

State:

ZIP Code:

Are you currently enrolled in college? Yes No

School Applicant will attend next fall:

Department and Major:

Expected Graduation Date:

Current GPA:

Extracurricular Activities

Please list your principal extracurricular, community, volunteer and family activities and hobbies in order of their interest to you. Include specific events and/or major accomplishments such as musical instrument played, varsity letter earned, etc.

Activities: