



WINTHROP
UNIVERSITY

*College of
Business Administration*

Undergraduate Scholarship Application

Date:

General Information

Student ID # _____ Major / Concentration/ Minor _____

Name – Last, First, Middle

Home Address – Street, City, State, Zip _____ County

Local Address (PO Box), City, State, Zip

Phone: _____ Email _____

Educational Information

Number of semesters at Winthrop University: _____

Class: Fr ____ So ____ Jr ____ Sr ____

Status: Full time ____ Part time ____

Expected date of Graduation: Month/Year _____

List previously attended colleges or universities (if applicable):

Name of institution:

Dates Attended:

Honors / Scholarships

Reference Information

Provide the names of 2 Winthrop professors who would recommend you for a scholarship:

Activities / Service / Leadership

List Winthrop and community activities in which you have participated and offices held while in college: (Use additional paper if necessary).

Winthrop Organizations **Leadership Role/Position** **Dates**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Community Activities **Leadership Role/Position** **Dates**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Employment

Name of current employer (s) and number of hours worked per week:

Employer:

Number of hours:

_____	_____
_____	_____

Additional Information

Please provide any other information that might be helpful in reviewing your application. Financial need is a consideration on a number of scholarships. (Use additional paper if necessary).

Essay

Please attach a typed essay of 300 words or less discussing your career goals. Please return your completed application to Thurmond 226.