##  WINSTON-SALEM STATE UNIVERSITY

##  Atlanta Alumni Chapter

##  SCHOLARSHIP APPLICATION FORM

**Applicant Type: (*Please Select One*)**

**Incoming Freshman**\_\_\_\_\_\_\_\_\_\_\_\_\_ **Upperclassmen** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Date of Enrollment** \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**First Name** **Last Name**

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**Permanent Address (Number, Street, City, and Zip Code)**

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**Local Address (Number, Street, City, and Zip Code) If Applicable**

**Home Phone Number:** ­­­­­­­­­­ ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Other Contact Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**High School or preparatory school last attended and Date of Graduation**

**List clubs, organizations, extra activities\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current GPA: \_\_\_\_**

All candidates are required to submit an official transcript and a two-page essay on the following topics dependent on their application type:

* **Incoming Freshman**
	+ Please write an essay explaining to the scholarship committee what our motto ***“Enter to Learn, Depart to Serve”*** means to you.
* **Upperclassmen**
	+ Please write an essay explaining to the scholarship committee your 5 year career plan upon graduation and how your education at Winston Salem State University prepares you for your designated path.

**By signing the application, I attest to the Scholarship Committee of the Atlanta Alumni Chapter that the information is accurate to the best of my knowledge.**

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Signature Date

**Please submit all completed scholarship applications to:**

**WSSU Scholarship Committee**

**By May 30th for Fall Semester and December 15th for Spring Semester to**

**P.O. Box 465111, Lawrenceville, GA, 30042 Or Email to** **wssuatl@gmail.com**