

2019-2020 Scholarship Application

** THE DEADLINE TO SUBMIT A 2019-2020 SCHOLARSHIP APPLICATION IS MARCH 1, 2019**

Scholarship Requirements

- ❖ Louisiana Resident Attending SUSLA
- Completed FAFSA and Admissions Application on File
- ❖ High School GPA Minimum 2.5 on a 4.0 scale (Entering Freshman)
- College GPA Minimum 2.5 (Continuing /Transfer)
- **❖** Act Composite Score of at least sixteen (16)
- ❖ Less than 85 Attempted College Credits

<u>DIRECTONS:</u> Please complete all sections of this application. Write N/A if questions do not apply to you. <u>Please type or print in ink.</u>

<u>NOTE:</u> High School students must submit ACT score and high school transcripts. College students must submit all college transcripts. <u>ALL STUDENTS MUST BE ENROLLED FULL TIME EACH SEMESTER.</u>

STUDENT INFORMATION:

Name:					
Last Name	First Name				
Social Security Number:	-				
Home Address:					
Number and Street	City	State	Zip Code		
Phone Number:	Birthplace:	Birthdate:			
	City, S	tate			
Sex: Race:	Mari	tal Status:			
Name of High School:	Graduation Date:				
Please Check One: () Entering Freshm	an () Freshman () Soph	nomore () Transfer			
Major:	Minor:				
High School/ College GPA:	ACT/SAT Score:	Total College Hours:			
ALTE	RNATE CONTACT INFORM	ATION:			
Parent/Guardian/Contact Person:		Relationship:			

Southern University at Shreveport does not discriminate on the basis of race, color, national origin, gender or disability. Title IX Coordinator: Dr. Tuesday Mahoney, Fine Arts Building, Room CO1, (318)670-9480, Section 504 Coordinator: Ms. Rubie Scere, Johnny L. Vance Jr. Student Activity Center, Room 212, (318) 670-9473.



Home Address: Number and Street	City		State	Zip Code
	EDUCATION INFO	RMATION:		
• Please provide informa	tion on other colleges, u	niversities and othe	r schools atter	ıded
Name of School	City, State	Major	Degree	Date(s) Attended
	DECUME	_	1	
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Attach Résumé should reveal a	•		ence. miorn	nation on
other professional and non-aca	ademic activities is	encouragea.		
	NOTE:			
Please submit a 500 word essay	·	chosen Southern	n University	at Shrevenort
for your academic endeavors.			-	•
joi your academic chacavors.	. This essay is REQ E	or the app	incution to	be reviewed.
		_		
Student Signature	Soc	ial Security Number	 Dat	te Completed
	**OFFICE USE ON			
Stud	dent/Spouse/Parent Guardi 	,		
	\$10,000-\$20,000			
	\$20,000-\$30,000			
	\$30,000-\$40,000 \$40,000-\$50,000			
	\$50,000-Over			
High School/College GPA	ACT/SAT Score	Total College	Hours	
			Date Comple	

Return Completed Application To:

Dr. Alan Jackson, Jr

Office of Student Financial Aid & Scholarships

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