SCHOLARSHIP QUALIFICATIONS

1. Show community involvement.

2. Must be a declared major in Early Childhood, Early Childhood Education, or Family Studies.

3. May be a part-time or full-time student.

4. Must have a college cumulative GPA of 2.5 or above.

5. Demonstrate financial need.

6. Preference will be given to students who have been a victim of a family member’s suicide.

APPLICATIONS ARE DUE MARCH 14, 2018
By 4:00PM
PLEASE RETURN TO ROOM 204 or 248

Application must be complete, references letters received, to be considered
WEBER STATE UNIVERSITY
BIRD SUICIDE AWARENESS
SCHOLARSHIP APPLICATION FORM

PLEASE PRINT OR TYPE APPLICATION

Name: ___________________________________________
        Last           First           Initial          W#

Address: __________________________________________________________

City: __________________________ State:___________ Zip: ______

Telephone: _______________________________________________________
        (Area Code) (Number)

Declared Major Within Department of CHF:___________________________
        (Must be officially declared with Registrar)

High School of Graduation? _________________________

College Cumulative GPA: _________________

_________ Two (2) required reference letters requested outside the
CHF department; professional references preferred.

_________ copy of transcript attached

_________ essay response below

Please explain why you feel you should be awarded this scholarship.
Please use a separate sheet of paper and answer in 12-point font with 1
each margins in no more than 2 pages.
Letters of Reference MUST be outside the department of Child and Family Studies

Dear Faculty Member OR Professional,

Please send your confidential evaluation, on this form or your own, of the undersigned CHF Department Scholarship applicant addressing his/her accomplishments and potential for making a significant professional contribution. Send to Darcy Gregg, 1351 Edvalson St Dept 1301, Ogden UT 84408-1301 or email to dgregg@weber.edu. Must be received by March 14, 2018.

Name: ____________________________________________

ID#: ______________________________________

Date: ____________________________

Signed: ____________________________________________

Title: ____________________________________________

Date: ____________________________
WEBER STATE UNIVERSITY
CHILD AND FAMILY STUDIES
SCHOLARSHIP APPLICATION REFERENCE

Letters of Reference MUST be outside the department of Child and Family Studies

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Name: _____________________________________________________________

ID#: _____________________________________________________________

Date: _____________________________________________________________

Signed: ___________________________________________________________

Title: _____________________________________________________________

Date: _____________________________________________________________