

APPLICATION FOR GRADUATE SCHOLARSHIP



The Beta Chapter of Phi Delta Gamma provides an annual award, the Phi Delta Gamma Scholarship, to a graduate student who is a candidate for an advanced degree in any school of The George Washington University and who shows scholarship, financial need, and promise. The applicant must have completed at least nine (9) semester hours of graduate work in his or her program at The George Washington University by January of the academic year in which the application is made. Scholarships are awarded on a one-year basis. Scholarships are awarded for GW tuition purposes and range from \$500-\$2000. No cash grants are given.

An applicant should feel free to provide any additional information with the application form. The Scholarship Committee may request a personal interview with the applicant. The deadline for submitting the application is **2 April 2009**.

Please submit completed application form to:

Office of Graduate Student Assistantships and Fellowships
2121 Eye Street, NW Rice Hall 602
Washington, DC 20052
Phone: (202) 994-6822
Fax: (202) 994-8845

Application is on-line at: www.gwu.edu/~fellows/pdg.html

APPLICATION FOR PHI DELTA GAMMA GRADUATE SCHOLARSHIP

Please type or print legibly in dark ink.

I. PERSONAL DATA

Student Name: _____
_____Ms. _____
_____Miss _____
_____Mr. _____
_____Mrs. _____
Last First Middle

E-mail Address: _____

GWid: _____

Current Mailing Address

Permanent Mailing Address

Home Telephone: _____

Work Telephone: _____

Date of Birth: _____ / _____ / _____
Month Day Year

Place of Birth: _____

U.S. Citizen? _____

School within GW: _____

Major: _____ Degree Objective: _____ GW Hours Completed: _____

Organization Memberships (include offices held, etc.) _____

Honors Received (scholastic and other) _____

Other Activities (e.g., volunteer organizations, hobbies, etc.) _____

List any fellowship awards you are currently receiving from GW _____

II. BACKGROUND INFORMATION

Educational History

You must furnish a transcript of both your undergraduate and graduate records (photocopies are acceptable) to the Office of Graduate Student Assistantships and Fellowships (address is on the cover page).

| Name and Location of College or University (City, State, Zip Code) | Months and Years Attended | | GPA | Degree and Date Earned |
|---|---------------------------|----|-----|------------------------|
| | From | To | | |
| 1) | | | | |
| 2) | | | | |
| 3) | | | | |

B. Employment History

Please attach a copy of your current resume. Your resume should indicate periods of employment, attendance in school, and other periods (e.g., such as travel, etc.).

III. STUDENT PROFILE AND PROJECTED PLANS

As stated on the cover page, one of the three criteria for selecting an award recipient is *promise*. In your own words, discuss your specific short-term and long-term goals. Explain your motivation for selecting your goals. Indicate what milestones, if any, you have already achieved in pursuing these goals. Discuss how your graduate education will help you in accomplishing your objectives.

This is an important section. Please attach additional pages in completing this section, if necessary.

IV. PROPOSED COURSE PLAN

Fall 2009

Spring 2010

| Course Number and Name | #Credits | Course Number and Name | #Credits |
|------------------------|----------|------------------------|----------|
| | | | |
| | | | |
| | | | |
| | | | |

V. RECOMMENDATIONS

Please list below the names of the two references who are familiar with your scholarship abilities. One recommendation must be from a GW faculty member. Please submit letters of recommendation along with this form, or ask your referees to forward their letters to Phi Delta Gamma, Beta Chapter, in care of the Office of Graduate Student Assistantships and Fellowships (address is on the cover page).

A. Name: _____

Email: _____ Telephone (with area code): _____

Address (indicate __office or __home)

B. Name: _____

Email: _____ Telephone (with area code): _____

Address (indicate __office or __home)

VI. CERTIFICATION

I hereby certify that all the information provided on this form is true to the best of my knowledge. I give permission to The Scholarship Committee of Phi Delta Gamma to make an investigation of the information provided herein. Furthermore, I agree to give proof of the information that I have given on this form if I am asked to do so by The Scholarship Committee. I realize that providing untrue information, or failing to give proof of information when asked, may disqualify me from receiving the Phi Delta Gamma Scholarship.

Signature of Applicant: _____

Date: _____

Checklist - Make sure your application includes the following:

- Application form, signed
- Resume
- Student Profile and Projected Plans Statement
- Unofficial transcripts from all higher education institutions attended
- Two letters of recommendation

DEADLINE: 2 April 2009