

GRAMBLING STATE UNIVERSITY

*Office of Advancement, Research
and Economic Development*



APPLICATION FOR SCHOLARSHIP

Name: _____

Home Address: _____

Campus/Local Address: _____

G# _____ Name of Parish or County Residency: _____

Phone #: _____ Alternate #: _____

Campus Email: _____ Personal Email: _____

Major: _____ Minor: _____

Classification: _____ Cum GPA: _____

Note: Please submit a 500 word essay along with application addressing your need and why you are deserving of this scholarship award to: **Office of Advancement, Research and Economic Development • GSU Box 4236 • Rose Wright (wrightr@gram.edu)**

FOR OFFICE USE ONLY

Date Submitted: _____

Approved (Yes/No): _____ Approved by: _____ Date: _____