

SOUTHERN NAZARENE UNIVERSITY
School of Education Scholarship Application - Fall ____ & Spring ____
Must be turned into the Teacher Education Office (H103) by TBA

Date of Application _____

Date Application Rec'd in Office _____

Name _____ ID# _____

SNU Address _____ Email _____

Permanent Address _____

Permanent Phone # _____ Marital Status: S M Gender: M F

Church Affiliation: _____ Name of Parents/Guardian _____

Address _____

What is your vocational goal? _____

What is your current classification? High School: 9 10 11 12 or Univ: 1 2 3 4 ACT Composite Score _____

If a university student, have you been admitted to Teacher Education/Where? _____

Major field of study _____ Faculty advisor _____

List places where you have been employed and type of work done

What amounts do you **anticipate** receiving from other sources, including home, scholarships, work, loans, etc. during the school year?

Your activities (include high school and college honors and offices):

Please list some individuals whom we may contact concerning this application. Include such persons as your pastor, teachers, employers, etc.

<u>Name</u>	<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
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1. _____
 2. _____
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Please write a brief statement of your PHILOSOPHY OF LIFE on the back of this page. You may include any additional information not covered in specific questions that you wish to convey. Include why you chose the teaching profession. Thank you.

Signed _____ Date _____