

Bluefield State College
Alumni Association, Inc.
219 Rock Street
Bluefield, West Virginia 24701

Alumni Scholarship Application

The Bluefield State College Alumni Association, Inc. supports the mission of the institution by providing students who demonstrate scholastic achievement and evidence of need of financial assistance, an affordable education in a caring environment.

Alumni Scholars will be required to maintain an **overall (to include all grades)** grade point average of 2.50. Alumni Scholars must be enrolled as full-time students carrying a minimum of 15 semester hours per semester. The progress of the alumni scholar will be reviewed at the end of each semester by the Alumni Association's Scholarship Committee. These scholarships may be renewed annually for up to four years depending upon established criteria are met.

The deadline for submitting all application materials is April 1st. Notices of initial awards will be made in May of each year.

APPLICATION PROCEDURES

FIRST-TIME APPLICANTS: *(those students applying for the scholarship for the first time)*

1. Complete the Alumni Scholarship Application Form legibly.
2. Compose an **ESSAY** of between 250 and 500 words (typewritten) on one of the following topics:
 - a. Share an experience which allowed you to develop an awareness of your academic capabilities.
 - b. Relate your interest in studying at Bluefield State College to your future goals.
 - c. Reflect your personal point of view on your **most significant challenge or accomplishment** and its value to your life.
 - d. Explain what you have done to make your community a better place to live. Give examples of specific projects in which you have been involved over time.
3. Attach high school transcripts (if first time applicant) **or** college transcripts to the application.
4. Attach three recommendation forms.
 - a. Students must have at least one recommendation from an alumnus.

FILL OUT THE APPLICATION IN ITS ENTIRETY

Return all necessary materials by April 1st to:

Office of Alumni Affairs
Bluefield State College
219 Rock Street
Bluefield, WV 24701

Applications *after* the deadline or incomplete applications will not be accepted.

FIRST-TIME APPLICANT

Bluefield State College
Alumni Association, Inc.

Alumni Scholarship Application Form

Instructions: Please read all questions before attempting to answer them. Type or print (in ink) answers to all the blanks on this application and return to the Office of Alumni Affairs, Bluefield State College, 219 Rock Street, Bluefield, WV 24701 by April 1st. Incomplete or late applications will not be accepted.

Name _____ Male _____ Female _____

Address _____

City _____ State _____ Zip _____

Date of Birth _____ City of Birth _____

Telephone Number where you can be reached _____

Email address: _____

BSC Email address: _____

Father's Name _____ Occupation _____

Employed by _____ Years employed there _____

Mother's Name _____ Occupation _____

Employed by _____ Years employed there _____

Total Annual Family Income \$ _____

Number of children living at home dependent upon the Total Family Income? _____

Number of dependents presently enrolled in college? _____

Name of High School _____

Address _____ City _____ State _____ Zip _____

Name of Principal _____

Rank in class _____ Class size _____ GPA _____

What awards have you received? _____

List the school activities in which you are/have been involved (clubs, organizations, offices):

In what community activities/organizations are you involved (church, "Y," etc., offices held)?

What are your hobbies or special creative interests?

What special talents do you possess (in the arts, athletics, and academics)?

List the names and phone numbers of two references or an appropriate body to document your degree of proficiency in your talent:

1. _____
2. _____

Expected/College Major _____

Career/Occupational Goals _____

References (Give the names and addresses of the three (3) persons whom you have asked to recommend you for an Alumni Scholarship. At least one reference shall be an alumnus (if applicable))

I have read the regulations on page two of this nomination form and accept nomination for the Bluefield State College Alumni Association, Inc. Scholarship under the conditions stated therein, I authorize the release to the award committee any information held by College Officials, and Others, to include but not limited to personal evaluations and transcripts. I understand that appropriate information may be released when awarding this scholarship. I further understand that the providing of fraudulent information disqualifies me as an applicant for this scholarship.

Print name

Signature

Date

Signature of Legal Guardian (if applicable)

Date