

Dear College of Education and Professional Studies Scholarship Applicant,

Enclosed are the College of Education and Professional Studies scholarship application and information for the **Virginia Peters** *Freshman* **Physical Education Undergraduate Scholarship for the** 2018-2019 academic year. Please submit your application to Carlie Wellington, EDU 216 or cwellington@uco.edu. **Only complete application packets will be eligible for review.** Applications preferred by March 31, 2018.

Scholarship Mission: To provide scholarship assistance to female students within the College of Education & Professional Studies who are pursuing undergraduate teaching degrees in physical education.

Criteria:

- 1- Freshman female student
- 2- Minimum 21 ACT score
- 3- Pursuing a Physical Education/ Health teaching degree
- 4- Demonstrate commitment to a physically active & physically fit lifestyle
- 5- Demonstrate appropriate behavior reflective of a professional person

A complete application packet contains the following documents in this order:

- 1. Application Form
- 2. Copy of your high school transcript
- 3. Personal Statement (Please limit your response to one paragraph, 200 words. Your personal statement must reflect your own ideas, financial needs and career goals. Briefly describe your academic interests and how they relate to your career objective)

Thank you for taking the time and diligence to ensure that you will be considered for the scholarships for which you are applying by checking all submitted materials for completion and quality. Know that you are a valued member of the College of Education and Professional Studies Family, and we wish you the best as you apply for the scholarship funds available! For information or questions, please call or email Carlie Wellington (405)974-5105 or cwellington@uco.edu.



College of Education and Professional Studies 2018 – 2019 Virginia Peters Freshman Physical Education Undergraduate Scholarship Application Form

ample: Department of Curricu	lum & Indstruction	applying for:_)				
Full Last Name (please Legal Name	print)	First Name	П	Middle Initial	Student Banner	· ID Number
Permanent Number/Street Address		City		State/C	County	Zip
Hometown Newspaper: _						
UCO E-mail Address		GPA:	_ Overall	Major	Year in College □Fresh. □Soph. □Graduate	
Best Phone Number to C	ontact You:		Sex: Male	☐ Female	Date of Birth (M	Mo./Day/Yr.) /
Major area of study at UCO fo	r 2018– 2019		Mino	r area of study at	UCO for 2018– 2019 (if applicable)
Do you pay: In-State Tuition: Out-of-Sta	ate Tuition: 🗖	Are you a U.S. Citizen:	2019:		n to enroll in for each	term in 2018–
What is your expected graduati	ion date:	Yes No No	Fall:	Spr CAA Division II at	ring: Sunthlete? Yes No No	mmer:
es and Awards: Summarize nization names. Please use t					e specific. Refrain fr	om using abbro
Activity	Involvement	Involvement		Positions held, responsibilities, and accomplishments		
	dates from/to	dates from/to hours per total week hours				

	ial aid received during the past three years.				
Description of financial aid received	Awarding organization	Award info	Award information		
		Dates from	Dates to	Total award	
Describe any financial need you may hav	e.				
How much of your tuition/fees a	re not covered by other scholarships or fina	ncial aid? \$			
What are your career goals after gradua	ion?				
Service Servic					
Personal Statement Please limit your response to one paragrap	h, 200 words. Your personal statement must refi	lect your own ideas, f	inancial need	ls and goals. Briefly	
describe your academic interests and how t	hey relate to your career objective.				
Faculty Reference/Support					
A reference/support form, found on the foll	owing page, must be given to two (2) faculty me faculty members you select will turn the form in		ar with your	academic work,	
PLEASE ENCLOSE THE FOLLOV	VING WITH YOUR APPLICATION AN	D COVER SHEE	T (provide	d in packet):	
☐ This application					
☐ High School Transcript☐ Personal Statement					
Tersonal Statement					
Certification – To Be Signed By All A					
If you are selected as a scholarship recischolarship donor and to be used in any	pient, do you agree to allow your name and publication with the scholarship?		nation to be	released to the	
	ecipient, you <u>may</u> be required to write a tl				

I have read and understand the enclosed information. I affirm that the information which I have provided on this application form and any additional material that I submit is complete, accurate, and true to the best of my knowledge. Pursuant to the Family Educational Rights and Privacy Act of 1974, as amended by FERPA, I hereby authorize the University of Central Oklahoma to release the scholarship application information provided by me, as well as other official and unofficial University of Central Oklahoma information regarding my academic progress and status, to scholarship donors for the purpose of providing the donors with information concerning my eligibility as a scholarship recipient. I also understand that

account.

Applicant's Signature

Date



