

**LSU MEMPHIS ALUMNI CHAPTER  
JAN MOORE MEMORIAL  
FRESHMAN SCHOLARSHIP APPLICATION**

**Biographical Information:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Init. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ County of residence \_\_\_\_\_

E-mail address \_\_\_\_\_ Phone (    ) \_\_\_\_\_

**Honors, Awards and Activities**

Please list any honors or awards you have received, as well as any academic activities you are involved in:

High School \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**RELATIVES WHO HAVE ATTENDED LSU**

Name	Dates Attended	How Related	Degree(s)

**Are your parents members of the LSU Alumni Association?**

Memphis Chapter: \_\_\_\_\_ YES \_\_\_\_\_ NO    Baton Rouge: \_\_\_\_\_ YES \_\_\_\_\_ NO

Other Chapter: \_\_\_\_\_ YES \_\_\_\_\_ NO (if yes, name and location of chapter) \_\_\_\_\_

## Employment Information

If you are currently not employed please skip to next section

Place of employment \_\_\_\_\_ hours per week \_\_\_\_\_

Position \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Address \_\_\_\_\_

May we contact your supervisor?  Yes  No

## Career Goals

Planned occupation or profession \_\_\_\_\_

Do you plan to further your education after graduation? Yes  No  If yes, how?

\_\_\_\_\_

## Educational Information

Name of High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Graduation Date \_\_\_\_\_ Overall GPA \_\_\_\_\_ ACT/SAT score \_\_\_\_\_

## Financial Assistance

Have you received scholarship aid at LSU? Yes  No  If yes, name and amount per academic year of the scholarship you have received and when you received it.

Scholarship	Amount	When
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Do you receive any type of financial aid at this time? Yes  No  If yes, please list the aid you receive (give name of scholarship, grant, or other aid and amount per academic year)

\_\_\_\_\_

\_\_\_\_\_

## Certification:

I certify that all of the data provided on this application is true and correct as of today's date and that I have not willingly withheld any pertinent information. I will use scholarship funds for educational purposes only. I give permission for information to be given to appropriate committees so that they may recommend eligible recipients. I do , do not  give permission for my transcript to be released to a scholarship sponsor.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Applications for scholarship are processed without regard to sex, age, race, color, creed, national origin or physical handicap. In 1987 and later years scholarship benefits are considered to be taxable income to the recipient.

***An Equal Opportunity/Affirmative Action University***

**In an essay of 250-300 words please explain why you have chosen to attend LSU**

Return your completed scholarship application postmarked by April 1st to:  
**Scholarship Committee, Memphis LSU Alumni, P.O. Box 17669, Memphis, TN 38187**