Lincoln University
TITLE III SCHOLARSHIP APPLICATION

Date: _____

Before this application can be activated, the following stipulations must be adhered to:

- ✓ Applicants must be working on a terminal degree in their area of study.
- ✓ Applicants must have been full-time employees of the University for at least one year.
- ✓ All requested documents must be filed with the application by deadline.
- ✓ Proof of acceptance into a degree seeking program must be provided.
- ✓ Proof that the applicant finished the courses in which they are enrolled (for employees who are currently scholarship recipients) must be provided.
- ✓ All parts of the application (including applications for returning scholarship recipients) must be completed and turned in to the Title III Office (202A Young Hall) by the deadline date.

Name_____Title _____# of Yrs. at LU _____

Home Address _____ Home Phone _____

Campus Address_____ Campus Extension_____

Application for _____Semester/Session Institution Enrolled_____

Degree Sought/Certification Pursuing (Please specify)_____

CREDIT HOURS:

Currently Enrolled _____ + Completed To Date_____ + This Application + Remaining_____ = Total _____

Anticipated Graduation Date_____

ANTICIPATED COSTS:

Directions: Please indicate below the amount requested for the semester/session noted above (please be as specific as possible).

A. Tuition: # of Hrs._____ X $ _____ Per Semester Hr. = $ _____

B. Activity Fees $ _____

TOTAL AMOUNT REQUESTED: $ _____

If awarded a grant the Professional Development Program will pay directly the institution where you are enrolled. In order to do this, the Professional Development Office will need either your pre-enrollment receipt and/or an invoice from the institution where you are enrolled.

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Please write a brief statement explaining how this course of study will enhance your professional career in your chosen field (limit 50 words or less).

_____
Signature

_____
Supervisor's Signature

_____
Appropriate Vice-President's Signature

FOR TITLE III OFFICE USE ONLY

APPROVED _____ **NOT APPROVED** _____

AMOUNT GRANTED _____

NOTES: