

ACE: Advertising Club of Evansville

P.O. Box 215, Evansville, IN, 47702

COLLEGE SCHOLARSHIP APPLICATION

Return completed application to your
advisor before **February 1, 2001**

(All information is confidential and will be read only by the Scholarship Committee)

1. Student name _____ Date of Birth _____

2. Home Address _____ Phone _____

3. City _____ State _____ Zip _____

4. Name of the college you are attending _____

Declared Major _____ GPA/Overall: _____ GPA/Major: _____

5. List extra-curricular activities in which you have been active, offices held, and honors received.

(Include work) (Use the back of the application if needed.)

6. List financial aid and amount which you have received.

Release of information: I hereby give permission for the results of the Financial Aid Form and a copy of the student's college transcript to be released to the Scholarship Committee ___

Student's Signature _____ Soc. Sec.# _____

RETURN COMPLETED APPLICATION TO YOUR ADVISOR BY February 26, 1999.

Advisor's Signature _____ Date _____