

The Citadel Women's Club's
John S. Carter Scholarship

2009-2010 Application Form

APPLICANT INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Permanent Mailing Address: _____

Phone Number: _____ Email Address: _____

Campus MSC Box: _____ Company: _____ CIT #: _____

Major: _____ Expected Graduation Date: _____ CUM GPA: _____

List the names and amounts of all scholarships you have previously received. Which of these are currently applied to your tuition?

Scholarship: _____ Date Awarded: _____ Amount: _____

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Scholarship: _____ Date Awarded: _____ Amount: _____

In the space provided below, list all awards and honors you have received, as well as all organizations, volunteer commitments, and other additional activities in which you are involved.

ADDITIONAL INFORMATION

Name of Parent or Guardian: _____

Are you a United States Citizen? Yes No

Have you completed at least two full semesters at The Citadel? Yes No

Have you applied for this scholarship before? Yes No Year? _____

REFERENCES

List list professors, coaches, TAC officers, or any other member of The Citadel faculty or staff to serve as character references.

Name: _____ Email Address: _____ Phone: _____ Relationship: _____

Name: _____ Email Address: _____ Phone: _____ Relationship: _____

STATEMENT OF RELEASE

I authorize The Citadel Women's Club to use my name, my photograph, and any information provided above for publicity involved with the John S. Carter Scholarship. If awarded this scholarship, I will perform a minimum of 15 hours of service toward The Citadel Women's Club Annual Garage Sale, which will be scheduled through COL John Carter. I understand this service commitment to be a requirement of my eligibility.

Applicant Signature: _____ Date: _____