Ball State University Alumni Association Legacy Scholarship Application

(Please print or type and complete all inf	formation r	equeste	d)				
Full Name			Email address				
Home Address							
City		State _		Zip_			
Campus Address			Campus phone	!			
High School		Grade l	Point Average/S	cale _		/	
SAT Scores V: M:	W:		Total SAT Sco	ore: _			
ACT (Composite):							
Class Status (circle one)	Freshman	1	Sophomore		Junior		Senior
College GPA	_ Intende	ed Major	/Minor				
From what school are you transferring?							
Extra-Curricular Activities as a Collegiate	e						
Community and/or High School Activities	s						
Parent(s), Grandparent(s), and/or Guard	dian(s) Nar	nes and	BSU Class Yea	r(s) _			
Name & complete address of hometown	newspape	er:					

Two reference letters are required with this application: one from a school official, administrator or instructor, and one from a community citizen unrelated to the applicant.

On a separate sheet, tell the selection committee about yourself and what the Legacy Scholarship will mean to you. Please limit your answers to one page. Your answers will assist the committee in its selection.

Additional information may be used from your application for admission and financial aid form.

The completed Alumni Association Legacy Scholarship application **MUST BE RECEIVED BY 5:00 P.M. ON THE FIRST FRIDAY IN FEBRUARY.**

Return this application to: BSUAA Legacy Scholarship

Ball State University Alumni Association

Muncie, Indiana 47306-0075