

Office use only

GPA \_\_\_\_\_

C.H. \_\_\_\_\_

EFC \_\_\_\_\_

Major \_\_\_\_\_

# George T. Keilholtz Scholarship

The George T. Keilholtz Scholarship is available to undergraduate, graduate and law students with disabilities who are enrolled for 6 credit hours or more each term. The student must have at least a 2.3 GPA. Applicants must have a current Free Application for Federal Student Aid (FAFSA) on file in the Office of Student Financial Aid.

Name

\_\_\_\_\_ Last

\_\_\_\_\_ First

\_\_\_\_\_ Middle

Address

\_\_\_\_\_ Street

\_\_\_\_\_ City

\_\_\_\_\_ State

\_\_\_\_\_ Zip

Rocket Number \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of High School \_\_\_\_\_

Date of High School Graduation \_\_\_\_\_

Student Status at The University of Toledo

Entering freshman

Freshman

Sophomore

Junior

Senior

LAW

HSC

Graduate

Current GPA (High School or College) \_\_\_\_\_

ACT Score \_\_\_\_\_

College Enrolled in \_\_\_\_\_

Major \_\_\_\_\_

The date you mailed your current *Free Application for Federal Student Aid* \_\_\_\_\_

*If you are employed, where do you work and how many hours per week do you work?*

Company Name \_\_\_\_\_

Hours \_\_\_\_\_

**Please attach a typed essay addressing the following:**

- Your extra-curricular activities and community involvement
- Your career objectives and personal goals
- Any special circumstances that you would like the scholarship committee to consider when reviewing this application.

*Applicant's signature grants the Office of Student Financial Aid permission to release grades and financial need information for the purpose of scholarship consideration.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Please return this application to:*  
Student Disability Services  
1820 Rocket Hall, Mail Stop 342  
The University of Toledo  
Toledo, OH 43606