

Office use only

GPA

C.H.

EFC

Major

# PAULA MARIE KUEHN ENDOWED SCHOLARSHIP

This scholarship is for students who are U.S. citizens, with first preference given to blind, hearing impaired, or student who uses a wheelchair for mobility. Second preference will be given to students with a lesser disability. Applicants may be undergraduate or graduate students enrolled at UT. While preference will be given to full-time students, part-time students may be considered. Applicants are to demonstrate financial need and have a GPA of 2.5 or higher. A completed current *Free Application for Federal Student Aid* (FAFSA) is to be on file in the Office of Student Financial Aid.

Name

\_\_\_\_\_  
Last

\_\_\_\_\_  
First

\_\_\_\_\_  
Middle

Permanent Address

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Local Address

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Local Phone

Home Phone

Rocket Number

Date of Birth

\_\_\_\_\_  
Month/ Date/Year

High School GPA (Entering Freshman Only)

College GPA

Type of disability

\_\_\_\_\_  
(Verification of disability will be coordinated with the Office of Accessibility)

Student Status at The University of Toledo

Entering freshman     Freshman     Sophomore     Junior     Senior     Graduate

College Enrolled in:     Arts&Sciences     Engineering     Pharmacy     Business Administration

Health & Human Services     University college     Education     Law

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

Company Name

Hours

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

Date the form was mailed: \_\_\_\_\_

Month/ Date/Year

**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 grant the Office of Student Financial Aid permission to release grades and financial need information for the purpose of scholarship consideration.*

*Please return this application to:*

Student Disability Services  
1820 Rocket Hall, Mail Stop 342  
The University of Toledo  
Toledo, OH 43606

Signature

Date