



The University of Toledo Professional Staff Association Scholarship Application

You are invited to apply for the Professional Staff Association (PSA) Scholarship.

This scholarship is awarded annually to a part-time or full-time student who is currently enrolled at The University of Toledo. The recipient must have completed at least two (2) semesters of coursework at UT and have sophomore or higher standing (30 earned hours) by time of application. To be eligible to receive this scholarship students must submit their completed application to include three (3) personal/professional references and attach both their 500-750-word essay and PSA letter of recommendation to their application.

Note that financial need will be considered for this award. The total amount of the award is \$500 and is intended to be used to support the educational expenses of the recipient.

2012-2013 PSA Scholarship Application Deadline is Sunday, April 15, 2012

**Application should be submitted to the PSA Scholarship Committee, c/o Myrna Rudder,
2801 W. Bancroft Ave, NE 1612 MS 402, Toledo, OH 43606**

Please print or type the following information.

Name: _____ Rocket #: _____

Local Address: _____
Street address, City, State, Zip Code

Email Address: _____ Date of Birth: _____

Local Phone: _____ Cell Phone: _____

Permanent Address: (if different than local address): _____
Street address, City, State, Zip Code

Academic College: _____

Major(s): _____

Minor(s): _____

Degree: _____

Anticipated Graduation Date (term/year): _____

Earned hours at time of application: _____

Essay Question: How will this scholarship impact your educational plan? (Please attach your essay (500-750 words) to this application.

Please attach a letter of recommendation from a current UT PSA member. For a list of PSA members, please visit the PSA website member list:

<http://www.utoledo.edu/org/psa/members.asp>.

Three (3) personal/professional references: References may include employers, community leaders, coaches, faculty members, advisors, religious leaders. Please include their names and phone numbers.

1)

2)

3)

I certify that the information contained in this application is complete, accurate, and true. I understand that any misrepresentation will result in the loss of scholarship eligibility. I understand that my signature authorizes The University of Toledo Office of Financial Aid to release the aforementioned information required for this application to the PSA Scholarship Committee. This information may include demographics, academic status, and financial need.

Signature: _____ Date: _____