

R.K. Hoddinott Endowed Scholarship in Business & Technology
Southeastern Louisiana University College of Business
Scholarship Application

Criteria:

- * Minimum GPA of 2.5.
- * Must be a male or female majoring in the College of Business.
- * Must be of good moral character.
- * Must demonstrate financial need.
- * Must be enrolled full-time at SLU.
- * Must include a copy of their resume.
- * This application may not be submitted electronically.

Retention: The student may retain the scholarship as long as the criteria are met.

The number of students this scholarship should be awarded to is 1.

Information to be completed by all applicants:

1. Name: _____.

W#: _____ . Phone number: _____.

Address: _____.

_____.

2. Current classification:

- A. Freshman (have earned less than 30 credit hours) _____
- B. Sophomore (have earned 30-59 credit hours) _____
- C. Junior (have earned 60-89 credit hours) _____
- D. Senior (have earned more than 90 credit hours) If a Senior, expected graduation date _____
- E. MBA student _____

3. A. Are you a transfer student? _____

B. If so, how many credit hours have you earned at Southeastern? _____

4. Current status:

- A. Full-time _____
(Undergraduate taking 12 or more credit hours)
(Graduate taking 9 or more credit hours)

B. Part-time _____

5. Major: _____

6A. Cumulative GPA: _____

6B. Hours completed/transferred: _____

7. Please describe financial need in the context of the Criteria described above.

8. What are your academic plans over the next two years at Southeastern?

9. What are your employment goals after graduation?

10. Please describe something about yourself that reflects your moral character.

Additional information:

1. Have you fully completed the above application? (incomplete applications will not be considered)
2. Did you attach a copy of your resume?

To the best of my knowledge and belief, there is no reason that would prevent my being eligible to receive the above-named scholarship. The College of Business, its Scholarship Committee, and its faculty and staff, have my permission to share my academic information and documents with the University Financial Aid Office, the Southeastern Development Foundation, governmental and university auditors and representatives of the donor for purposes of verifying my eligibility for this scholarship. I understand that in order to receive this scholarship, I must enroll at Southeastern Louisiana University and continue to meet all scholarship guidelines.

I have read and accepted the above statement and understand that incomplete applications will not be considered.

Signature

Date