



Wesley

COLLEGE

Great Things Await

CANNON SCHOLAR PROGRAM

APPLICATION FORM

Please provide the following information. **All information is confidential.** If you are concerned about any of the questions asked on this form, please discuss them with the Cannon Scholar Program PI (Principal Investigator), Dr. Malcolm J. D'Souza, malcolm.dsouza@wesley.edu, or the Director of Student Success and Retention, Ms. Christine McDermott, christine.mcdermott@wesley.edu. **To be considered for a scholarship award, all outlined application requirements must be fully complete and submitted via e-mail to Ms. McDermott by the specified deadline for the semester that you are applying. If all requirements are not fully complete by the semester deadline, then your application will be denied.**

- I am applying for a fall scholarship - Due by April 1 I am applying for a spring scholarship - Due by December 1
- Application Form
- Personal essay
- FASFA form

Student ID	Name (Last, First Middle Initial)		
E mail	Mail Box#	Phone	Birth date
Permanent Address	U.S. Citizen		Gender
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> M <input type="checkbox"/> F
Major (mark all that apply)			
<input type="checkbox"/> BIOCHEM <input type="checkbox"/> BIO <input type="checkbox"/> MTH <input type="checkbox"/> ES			
Year in School (this fall)	Anticipated Graduation Date		
<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior			
Ethnicity (mark all that apply)			
<input type="checkbox"/> Asian American <input type="checkbox"/> Alaska Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other			
<input type="checkbox"/> Caucasian <input type="checkbox"/> Latino/Hispanic American <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Native American/American Indian			

- I certify all of the above information to be true and I hereby authorize the PI or the Director of Student Success to disclose or obtain educational records and information with any faculty or staff member, as deemed appropriate by the Cannon Scholar Program staff.
- I hereby authorize the Financial Aid Office at Wesley College to release my financial aid information to the Director of Student Success.

Applicant's Signature _____

Date _____

Wesley College will not discriminate on the basis of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, or status with regard to public assistance in its admission, employment, programs or activities.

FOR OFFICE USE ONLY

Federal Financial Aid Received		
<input type="checkbox"/> Subsidized Stafford Loan <input type="checkbox"/> Unsubsidized Stafford Loan <input type="checkbox"/> Pell Grant <input type="checkbox"/> Perkins Loan	<input type="checkbox"/> Other Federal Scholarships Name: _____ <input type="checkbox"/> Financial Need totals more than \$4,250 OR _____	
Unofficial Transcripts Verified?	GPA	Essay Received?
<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ / 4.00	<input type="checkbox"/> Yes <input type="checkbox"/> No

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CANNON SCHOLAR PROGRAM APPLICATION ESSAY

Please discuss your post-graduation plans for entering the workforce OR for entering graduate school and how participating in the Cannon Scholar Program would assist you in meeting those goals. Please provide your clear and concise response in the space provided below, or on a separate attached page (250-300 words).