

Allie Beth Martin Scholarship Application



Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Legal Resident of Oklahoma Yes No

Have you ever received scholarship assistance from the library or Friends of the Library? Yes No

Financial Aid requested for academic year _____

Program in which you are currently enrolled _____

Name of High School _____ Year Completed _____

Location _____

Name of University _____ Bachelor's Degree _____

Location _____ GPA _____

Name of University _____ Bachelor's Degree _____

Location _____ GPA _____

Expected Graduation Date _____

List the Course Titles and number of Credit Hours you plan to enroll in for the next academic year

College honors, offices held, extracurricular activities

Your college and vocational plans

Additional information you wish considered

Financial need *Please indicate your annual household income (Yourself or you and spouse)* Under \$5000
 \$5000-10,000 \$10,000-15,000 \$15,000-20,000 \$20,000-25,000 \$25,000-30,000 Over \$30,000

References: *Name, Title, Address, Years Known*

1. _____
2. _____
3. _____

Please attach a copy of your up-to-date transcript, a current résumé, three letters of reference and a statement of your plans for the next five years.