

CARROLL COLLEGE APPLICATION FOR DR. ANNETTE MORAN CSJ ENDOWED SCHOLARSHIP IN THE HUMANITIES

Academic Year 2021-2022 Application Deadline: February 1, 2021

DESCRIPTION

The Dr. Annette Moran CSJ Endowed Scholarship was established in memory of Annette Moran in recognition of her contributions to Carroll College.

ELIGIBILITY CRITERIA

- 1. Academic integrity, a minimum of a 3.25 grade point average;
- 2. Full-time student (12 or more credits);
- 3. Financial need;
- 4. Majoring in Humanities: Theology, Philosophy, Languages and Literature, History, or Fine Arts;
- 5. Sophomore, Junior or Senior status.

SELECTION COMMITTEE & NOTIFICATION OF AWARDS

A selection committee will review applications and select scholarship recipients. Carroll's Financial Aid Office will notify applicants of the results of the selection process.

APPLICATION PROCESS

- 1. Complete the application on the back of this page.
- 2. Submit the completed application to the Financial Aid Office (ATTN: Financial Aid Director) no later than February 1, 2021.
- 3. Financial Aid Director provides committee members with the applications.

(See Over for Application)

CARROLL COLLEGE APPLICATION FOR DR. ANNETTE MORAN CSJ ENDOWED SCHOLARSHIP IN THE HUMANITIES

Academic Year 2021-2022 (See Over for Information about Scholarship)

| PERSONAL INFORMATION | |
|---|-------------------------|
| Name Student I.D | |
| Hometown Address | |
| Local Telephone No E-Mail Address | |
| Current Cumulative Carroll GPA Last Semester's GPA | |
| Total Credit Hours Earned Academic Major | |
| This scholarship was established in the memory of Dr. Moran, a professor in the Theology often wished she could help students when financial challenges got in the way of educatio In an essay of 500 words or less please explain to the committee why you need this scholar typed essay to the application. | y Department, who n. |
| I authorize Carroll College to provide the Dr. Annette Moran CSJ Scholarship Committee it requests. I authorize my name and photo to be used for publicity purposes in the event I recipient. I also certify that the information I have included in this application is true to the knowledge. | I am selected as a |
| Signature Date (See Over for Information about Scholarship) FAC21MO | DR |