

**PHI THETA KAPPA SCHOLARSHIP APPLICATION
UNIVERSITY OF ILLINOIS AT SPRINGFIELD**

Name: _____
Last *First* *M.I.*

Social Security Number: (optional) _____ Date of Birth _____

Address: _____
Street

_____ *City* *State* *Zip*

Phone: _____
(Day) *(Evening)*

E-Mail address: _____

Name of the community college and year in which you were named to Phi Theta Kappa:

_____ *Community College* *Year*

I plan to enroll at UIS for: _____ credit hours Fall 2009 semester

NOTE: *All scholarship recipients must be newly enrolled on a full-time basis beginning the fall semester and remain enrolled as full-time students in good academic standing in order to be eligible for renewal. Scholarship recipients may receive this scholarship for a total of up to 4 consecutive semesters (excluding summer terms). This scholarship can be used to cover tuition cost only. If you receive a tuition waiver award, you are not eligible to receive this scholarship.*

INSTRUCTIONS: *Mail this application, a brief personal narrative, two letters of recommendation, and official copies of your academic transcripts to:*

Office of Admissions
Attn: Phi Theta Kappa Scholarship Committee
University of Illinois at Springfield
One University Plaza, MS UHB 1080
Springfield, IL 62703-5407

Narrative must be written by you and should identify specific characteristics such as personal, educational and vocational goals, awards, honors, volunteer work, community involvement, and activities. The format of the narrative is at the discretion of the student. Suggestions include resume style or brief (two page maximum) essay.

Letters of recommendation may be from faculty, academic program committee members, an employer, or someone who knows you well.

Scholarships range up to \$1000.

DEADLINE: APRIL 1, 2009