



The Ohio State University Alumni Scholars Program

Application

Part I: Should be filled out by the student applying for the scholarship.

Part II: Should be filled out by the principal, counselor, or teacher.

The Alumni Scholars Committee in your area will screen applicants and interview finalists to select the best prospective student for this scholarship. Please review *Information for the Student* prior to completing this form.

Part I:

Name			Social Security Number
Home Address			Home Phone
City	State	Zip	E-mail Address
County	High School	Graduation Date	

PLEASE NOTE: All applicants must complete the Application for Freshman Admission, Scholarships, and Financial Aid, which is available in the Viewbook. Date submitted: _____

HIGH SCHOOL ACHIEVEMENTS (honors, awards, leadership roles, activities, volunteer service)

Freshman year: _____

Sophomore year: _____

Junior year: _____

Senior year: _____

Please highlight your volunteer service (not school related):

Please describe your employee experience (type, hours per week, etc.):