

Please write a short statement regarding your educational and career goals:

Why would you like to attend Ohio State?

If you wish to be considered for an award as an enrolled student, it is necessary to meet certain academic requirements. Please indicate your permission for university representatives to review your grades by signing below.

Please sign your full name. (first, middle, last)

Part II

Completed by high school principal, counselor, or teacher on _____, 2008

Student's GPA: _____ Student's Class Rank: _____
ACT Score: _____ Combined SAT Critical Reading & Math Scores: _____
Number of Students in Graduating Class: _____

**If your high school doesn't rank, do you consider this student to be in the top 10% of his/her class? YES___ NO___ Or in the top 10%? YES___ NO___*

General estimate of this student's success in college (Letters of recommendation may be attached):

Additional Comments:

Signed _____ Print your name

Title _____ Your telephone number

School name _____ School address

PART III

Send completed application, updated transcript & return by: **January 15th**
To Scholarship Chairperson:

Carol Kinsey	330-879-2417	cskinsey@aol.com
Name	Telephone	Email Address
5989 Sanvale Ave	Navarre	OH 44662
Mailing address	City	State Zip

Note: Please limit attachments to no more than 2 additional sheets.