

ROBERTA B. HILL
SCHOLARSHIP APPLICATION

Department of Family & Consumer Sciences
Eastern Kentucky University

Application Deadline: February 15

Name: _____ Today's Date: _____

Birth Date: _____ Student ID #: _____

Local Address: _____ Phone: _____

E-Mail Address: _____

Permanent Address: _____

Spouse or Parent's Name & Address: _____

Undergraduate Major: _____ Second Major or
Minor: _____

Academic Advisor must complete this section before application is submitted.

Cumulative GPA: _____ Anticipated Date of Graduation: _____

Advisor's Signature: _____

College Activities and Organizations: (Indicate Leadership Positions) _____

Community Service: _____

College Honors and Awards _____

Plans after Graduation: _____

Employer: _____ Number of Hours You Work per Week: _____

Do You Have Financial Need? _____

Explain Any Factors Which Contribute To Your Financial Need: _____

Indicate Approximate Percentages (%) of How Your College Education is Being Financed:

Family: _____% Scholarship: _____% Loans: _____% Employment: _____%

Other: _____% Explain (Other): _____

For What Aspect Of Your Education Do You Plan To Use These Funds: _____

Checklist: Your completed packet should include: _____ Completed Application Form
_____ Two (2) Letters of Recommendation
_____ Official EKV Transcript

Please Return by February 15 to:

Department of Family & Consumer Sciences
Scholarship Committee
Eastern Kentucky University
102 Burrier
521 Lancaster Avenue
Richmond, KY 40475

Note: If you are applying for both the Burrier and Hill Scholarship, letters of recommendation may be copied and used for both.