

**LEHIGH UNIVERSITY  
COLLEGE OF EDUCATION  
SCHOLARSHIP APPLICATION — SUMMER SESSIONS 2019**

**Name:** \_\_\_\_\_  
Last First Middle Lehigh Identification Number  
(or SSN if LIN not assigned)

**Address:** \_\_\_\_\_  
Street

City State Zip Code (Area Code) Phone Number

☐ Male ☐ Female

**Are you a U.S. Citizen?** ☐ Yes ☐ No

**Program:** \_\_\_\_\_ **Adviser:** \_\_\_\_\_ **Degree Sought:** \_\_\_\_\_

**Graduate Credits**  
Total Credits Completed: \_\_\_\_\_ Credits Enrolled Current Semester: \_\_\_\_\_ Graduate GPA (on a 4.0 scale): \_\_\_\_\_

**Check type of current support:** ☐ R A ☐ T A ☐ G A ☐ Fellowship ☐ Other ☐ Tuition Only

**Identify Source:** \_\_\_\_\_  
Stipend Tuition

**Semester for which aid is requested:** Summer 2019  
**Number of credits requested:** \_\_\_\_\_ Summer

**Previous Education**

**Undergraduate**

Institution Major Degree Date From Date To GPA

**Graduate or Professional**

Institution Major Degree Date From Date To GPA

Institution Major Degree Date From Date To GPA

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Adviser's Signature**

\_\_\_\_\_  
**Date**

**NOTE:** • Applicants should complete this application and forward it to their adviser or program director NO LATER THAN Friday, December 14, 2018, who will forward it to the department chairperson.  
• No applications for scholarship will be considered without program recommendations.

**POLICY OF EQUALITY** It is the policy of Lehigh University to provide equal opportunity on the basis of merit and without discrimination because of race, color, religion, sex, age, national origin, citizenship status, handicap, or veteran status.