**ROGERS STATE UNIVERSITY FOUNDATION**  
**APPLICATION FOR UNRESTRICTED SCHOLARSHIPS**

**DEMOGRAPHIC INFORMATION:**  
**ATHLETE:**    
**EMPLOYEE:**    
**WALK-IN:**

Date: ___________________________ Semester applying: ___________________________

Name: ___________________________ Student ID: ___________________________

Address: ___________________________________________ City: ________________

State: __________________ Zip: ___________ County: ______________

Phone: ___________________________ Email: __________________

Marital Status: Single:   Married:   Children:   Residency: On Campus or Home

Employment: ___________________________________________

**ACADEMIC INFORMATION:**

GED: ______ Name of High School: ___________________________ Graduation Year: _______

Previous institutions attended: ___________________________________________

Previous degree earned: ___________________________________________

Educational Goal: ___________ Major Field of Study: ___________________________

Class: ___________________________  
Credit hours earned: ___________________________ Hours currently enrolled: ________________

GPA: ___________________________

**FINANCIAL INFORMATION:**

**TO BE COMPLETED BY RSUF**

FAFSA COMPLETED: YES  NO

TOTAL BILL/BILLED AMOUNT: ___________________________ EFC: ___________________________

TOTAL GIFT AID: ___________________________ FTI: ___________________________

PELL: ___________________________

TOTAL LOANS: ___________________________

OTHER EXPECTED AID: ___________________________

**NEED:**

REQUESTING AMOUNT: ___________________________ REFERRING BY: ___________________________

REOCCURRING ASSISTANCE: ___________________________

FALL/YR ____________________ SPRING/YR ____________________ SUMMER/YR ____________________

**STATUS/AWARD AMOUNT:**

NOTES: