



France Davis Scholarship Application

DSU MULTICULTURAL
DIXIE STATE UNIVERSITY INCLUSION CENTER

SCHOLARSHIP ELIGIBILITY — BEFORE COMPLETING THIS APPLICATION PLEASE READ THE FOLLOWING:

Deadline: Priority given to applications received before March 1st, 2019 — Open until filled.

- Must be a U.S. Citizen.
- Must be enrolled full time (min. 12 credits) and an undergraduate student at DSU.
- Applicant must identify as African-American/Black.
- Must have a minimum 2.5 Overall GPA.
- Must complete the Financial Aid (FAFSA) form (<https://fafsa.ed.gov>).
- Attach a copy of your DSU Financial Aid Award History from your DSU Banner Account.
- Applicant must provide a transcript reflecting current GPA. Transcript does not need to be official). First time freshman, please include High School Transcripts.

Scholarship awards are based on availability of funds

FRANCE DAVIS SCHOLARSHIP REQUIREMENTS:

1. Maintain a minimum cumulative and semester GPA of a 2.0.
2. Attend the Multicultural Scholarship retreat.
3. Turn in a mid-term grade check.
4. Partake in the Multicultural & Inclusion Center's activities and events.
5. Work assigned hours in the Multicultural & Inclusion Center.
6. Serve on one of the Multicultural & Inclusion Center's committees and fulfill committee responsibilities.

If and when this application is approved, I hereby agree to abide by all obligations and requirements for the Multicultural and acknowledge that if I (the student) fail to fulfill any of these requirements my scholarship will be subject to termination and I may have to pay back the scholarship to Dixie State University.

Upon signing this agreement you (the student) acknowledge full understanding of the agreement and all of its requirements as stated.

Signature: _____ Date: _____

Personal Information

Application needs to be neat, legible and written/typed in black ink.

Dixie State University Student ID #: _____

Name: _____

Last

First

Middle Initial

Date of Birth: _____ Email address: _____
mm/dd/yyyy

Home Phone Number: _____ Alt./Cell Phone Number: _____
e.g. (435) 111-1143 e.g. (435) 111-1143

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____

Year in College: Freshman: _____ Sophomore: _____ Junior: _____ Senior: _____ Cum. GPA: _____

Declared Major: _____ Bachelors Program: _____

Associate Degree: _____ Certificate: _____

Are you a legal resident of Utah? Yes _____ No _____ State of residency: _____

Non-Traditional Student? Yes _____ No _____ Single Parent: Yes _____ No _____

Ages of Dependent Children: _____

Tribe Affiliation: _____

Financial Aid Information

****Attach a copy of your DSU Financial Aid Award History from your DSU Banner Account****

Are you receiving Pell Grant or other Federal Student Aid? Yes _____ No _____ Amount/Yr- \$ _____

Have you received the France Davis Scholarship before? Yes _____ No _____

Year: _____ Amount: \$ _____

_____ \$ _____

_____ \$ _____

Are you receiving any other scholarships? (Include those that are pending) Yes _____ No _____

Name of Scholarship & Amount:

Title: _____ Amount: \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Are you a dependent of a full time DSU Employee? Yes _____ No _____

Name of Employee: _____ Department: _____

Are you receiving tuition assistance from Rehab, JTPA or any other State Agency? Yes _____ No _____

Name of agency: _____ Contact person: _____

Essay Requirement

In your essay, address ALL of the following requirements. (1/2 page min. with 12pt font, double-spaced):

1. Tell us about yourself. Discuss your educational goals, career plans and cultural background.
2. Explain why you should be considered for this scholarship.
3. Describe your involvement with the community and school. (E.g. student government, service projects, etc.)
4. What leadership positions have you had and what experience/skills do you possess.

I understand that by completing this application, I will be considered for a scholarship at DSU and that I am not guaranteed a scholarship. I have read the instructions and certify that the above information provided in this application is true and correct to the best of my knowledge. I also declare that if I attend Dixie State University, I will abide by the academic, scholastic and social standards of the college. A student found guilty of non-disclosure or misrepresentation in completing this form will be subject to disciplinary action, loss of scholarship and/or dismissal from Dixie State University. If and when this application is approved, I will abide by the Multicultural Scholarship policy and procedures.

Signature: _____ Date: _____

Submit your complete application to:

Joni Hale
Assistant Director of Scholarships
Financial Aid
Office #: 435.652.7578
225 South 700 East
St. George, UT 84770

Questions?
435.652.7730

Email questions to:
mic@dixie.edu