

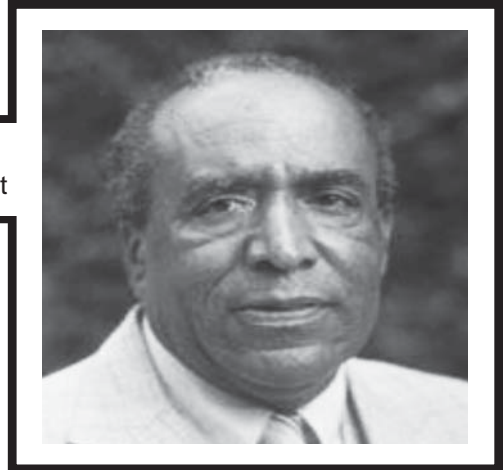
DEADLINE: MARCH 1st



Eastern Kentucky University

Dr. Rodney Gross Diversity Scholarship Application

Please check one: Incoming Freshman Current Transfer Grad Student



Dr. Rodney T. Gross, Jr. served on the Board of Regents of Eastern Kentucky University from 1981-1992. Dr. Gross held a Doctor of Veterinary Medicine from Tuskegee University and practiced 35 years in Carter County, KY. During his participation at EKU, he was an avid spokesman for higher education.

Name: _____

SSN/EKU ID Number: _____ - _____ - _____ Phone Number: (_____) _____ - _____

Permanent Address/Route: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

County: _____ High School: _____

Intended Major: _____

Year: _____ Term: (circle) **FALL** **SPRING**

Ethnic Group:

- White (Non-Hispanic)
- Black (Non-Hispanic)
- Asian or Pacific Islander
- Hispanic/Latino
- American Indian or Alaskan Native
- Other (please specify) _____

High School/College GPA: _____ Rank In Class: _____

ACT Scores: _____ **COMPOSITE:** _____
English Math Reading Science Reasoning

(Please use the highest test and composite scores from a single testing)

Note:

Application cannot be considered unless all information is completed and returned with the following items:

- Completed Application
- One Letter of Recommendation from School Official
- One Letter of Recommendation from Community Leader
- High School/College Transcript
- Essay on "How can belonging and participating within a diverse community aid in the development of your academic, social and career goals?"
(One-page, single spaced, typed)



Return completed application to:

**EKU Scholarship Office
Whitlock CPO 56
346 Student Success Building
521 Lancaster Avenue
Eastern Kentucky University
Richmond, KY 40475-3156**

**Phone: 859-622-8032
Fax: 859-622-8479
www.scholarships.eku.edu**

Please list information regarding high school/college and/or community honors, activities, and any other information that you would like the Scholarship Committee to know about you (attach a separate sheet if necessary).

I hereby verify that all the information that I have provided is accurate. Your signature gives permission for the Scholarship Committee to review any academic records.



Signature of Applicant _____

Date _____